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**Calspan SRL Corporation
[REDACTED], New York 14225**

CALSPAN ON-SITE AIR BAG/CHILD FATALITY INVESTIGATION

CALSPAN CASE NO. 96-16

VEHICLE : 1996 DODGE CARAVAN

LOCATION: FLORIDA

CRASH DATE: [REDACTED], 1996

Contract No. DTNH22-94-D-07058

Prepared for:

**U.S. Department of Transportation
National Highway Traffic Safety Administration
Washington, D.C. 20590**

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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points are coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

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16. <i>Abstract</i> <p>This on-site investigation focused on a two-vehicle intersection-type crash that resulted in the death of a 7 week old infant female. The infant was secured in a rearward-facing Century infant restraint that was positioned in the right front of a 1996 Dodge Caravan. The Dodge Caravan was equipped with driver and passenger side air bags which deployed as a result of the crash.</p> <p>The deploying passenger side air bag contacted the leading edge of the plastic shell and fractured the shell of the restraint. The infant was restrained in the child safety device by the integral 3-point harness system. Her head was presumably positioned at the upper area of the restraint and as a result of air bag contact, the infant sustained a transverse skull fracture that extended across the top of the skull from ear-to-ear (AIS-2), unspecified brain contusions (AIS-3), cerebral lacerations (AIS-4), subarachnoid hemorrhage (AIS-3), and subdural hemorrhages (AIS-4).</p> <p>The infant was transported from the scene by fire rescue personnel to a local trauma center where she expired upon arrival.</p>			
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CALSPAN ON-SITE AIR BAG/CHILD FATALITY INVESTIGATION

CALSPAN CASE NO. 96-16

VEHICLE: 1996 DODGE CARAVAN

LOCATION: FLORIDA

CRASH DATE: [REDACTED], 1996

SUMMARY

This on-site investigation focused on a 7 week old infant female who was positioned in a rearward-facing child restraint in the right front of a 1996 Dodge Caravan. The Caravan was equipped with driver and passenger side air bags which deployed as a result of a moderate severity front-to-side impact configuration with a 1966 Chevrolet Impala. The passenger side air bag module cover flap and the deploying air bag contacted and fractured the plastic shell of the restraint. As a result of bag deployment against the child restraint, the infant sustained a transverse skull fracture that extended across the top of the skull from ear-to-ear (AIS-2), a fracture that extended through the right middle cranial fossa and petrous bones (AIS-3), unspecified brain contusions (AIS-2), focal subarachnoid hemorrhage (AIS-3), subdural hemorrhages (AIS-2), and lacerations of the right orbital and inferior temporal lobes (AIS-4). The infant was removed from the child restraint by the driver (mother) of the Dodge Caravan and was subsequently transported by ambulance to a local trauma center where she expired upon arrival.

The investigating police officer determined that the deploying air bag was the primary mechanism for the fatal injuries sustained by the infant and notified NHTSA of the crash on [REDACTED]. The Calspan Special Crash Investigation team was immediately notified by NHTSA of the crash and initiated an on-site investigation on [REDACTED].

The crash occurred at a four-leg intersection of two local streets in an urban residential area in [REDACTED], 1996, during nighttime hours. Weather conditions were police reported as overcast with rain, therefore the asphalt road surfaces were wet. Both roadways were straight and level with posted speed limits of 48 km/h (30 mph). The east/west legs of the intersection were regulated by stop signs. There were no traffic controls for north/southbound traffic flow.

The Dodge Caravan was traveling in a westerly direction on an approach to the intersection at a police estimated speed of 32 km/h (25 mph). The 37 year old female driver of the Caravan failed to stop for the regulatory stop sign and entered the intersection. There was no evidence of braking (i.e., skid marks) to support avoidance actions, however, based on the impending crash data, the driver of the Caravan probably braked in an attempt to avoid the crash, or was traveling at a speed that was less than the police estimated speed. The 1966 Chevrolet Impala was traveling in a northerly direction on the intersecting roadway at a police estimated speed of 32 km/h (25 mph). As the Impala entered the intersection, the vehicle was struck on the right rear quarter panel by the frontal area of the Caravan.

The full frontal area of the Dodge Caravan impacted the right rear quarter panel of the Chevrolet Impala which resulted in respective force directions of 11 and 2 o'clock. The impact compressed the Caravan's bumper fascia and crushed the bumper reinforcement bar to a maximum depth of 32.4 cm (12.75") located 15.9 cm (6.25") right of the vehicle's centerline. The Chevrolet sustained 15.2 cm (6.0") of sheetmetal crush located on the quarter panel at the forward edge of the wheel opening. Collision Deformation Classifications of 11-FDEW-2 and 02-RZEW-1 were encoded for the Caravan and Impala respectively. The damage algorithm of the SMASH program computed velocity changes of 19 km/h (12 mph) for the Caravan and 18 km/h (11 mph) for the Impala. The longitudinal component of the Caravan's deceleration was sufficient to deploy the vehicle's driver and passenger side air bag system.

The driver of the Caravan was a 37 year old female with a police reported height of 167.6 cm (66.0") and weight of 63.5 kg (140.0 lbs.). She was not wearing the manual 3-point lap and shoulder belt system. There was no loading evidence on the belt system and minimal wear marks on the latchplate from routine usage. The D-ring was adjusted to the lowest adjustment point. The driver's manually adjusted seat track was positioned at mid track, 10.8 cm (4.25") rearward of the full forward position, with the seat back reclined to 25 degrees at the lumbar support area. At impact, the driver initiated a trajectory that was forward and to her left. She loaded the deployed driver's side air bag which prevented her from contact with the steering assembly and/or windshield. And as a result, the driver was not injured.

The driver had positioned her infant daughter in a rearward-facing Century infant restraint in the right front of the Dodge Caravan. The model number of the infant restraint was identified as [REDACTED] and the date of manufacture was identified as [REDACTED] 94. Numerous warning labels were affixed to the restraint, however, none of the labels addressed rearward-facing restraints and passenger side air bags. The right front seat track was adjusted to the full forward position with the seat back reclined to 25 degrees at the lumbar support region. With the right front seat adjusted to this position, the upper area of the infant seat was positioned against the mid-mount passenger side air bag module cover flaps. At impact, the passenger side air bag deployed from symmetrical H-configuration cover flaps. The air bag module cover flaps opened against the back side of the plastic shell of the restraint. White vinyl-type transfers were noted across the full width of the cover flap. Two similar transfers were noted to the upper corner areas of the lower cover flap. The deploying air bag membrane subsequently expanded against the shell of the restraint, which in combination with the cover flap contact, severely fractured the shell of the restraint.

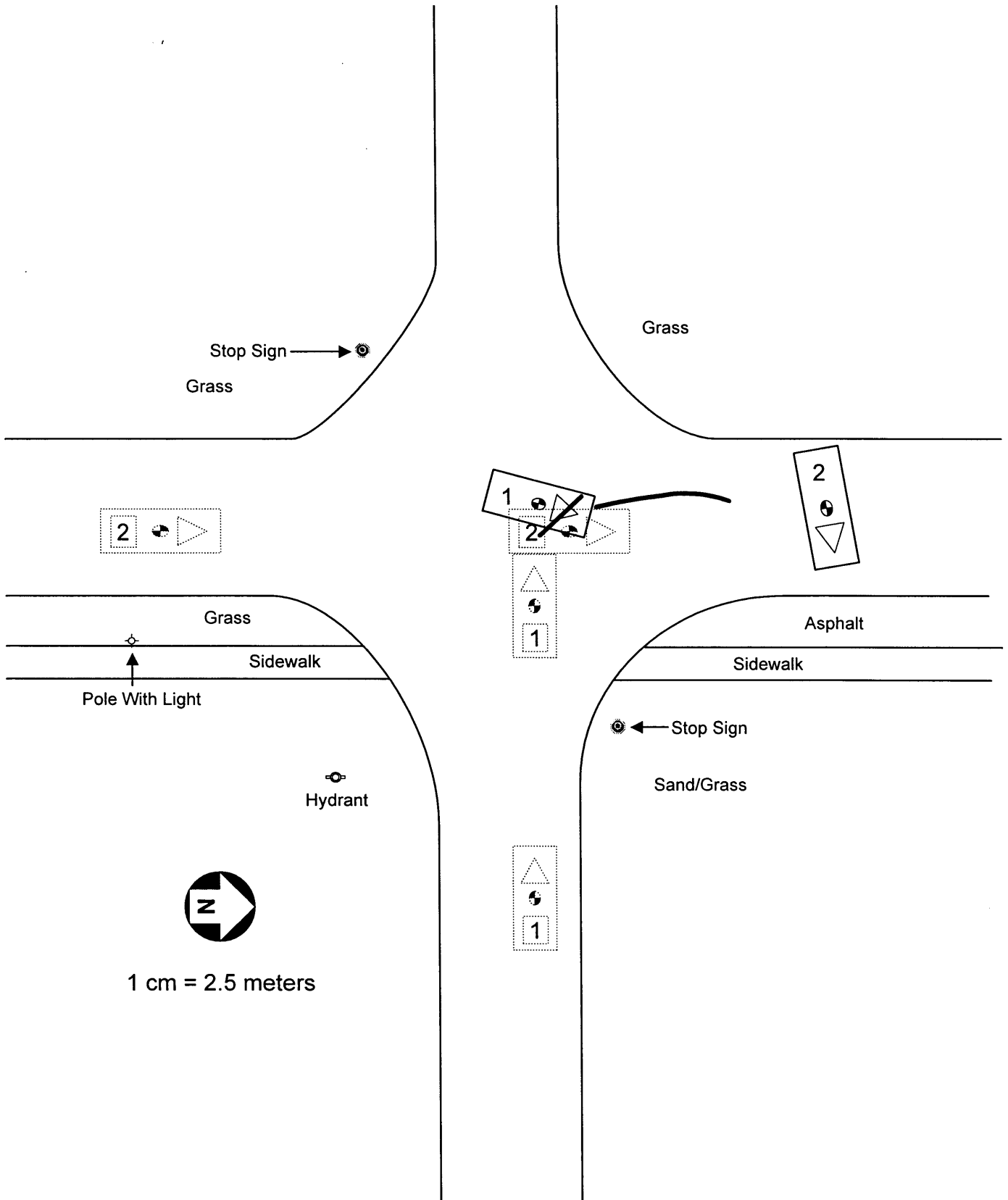
The infant was assumed to have been properly positioned in the restraint with her head resting in the vicinity of the air bag module cover flaps. Deployment of the passenger side air bag against the rearward-facing infant restraint resulted in a transverse skull fracture that extended across the top of the skull from ear-to-ear (AIS-2), a fracture through the middle cranial fossa and petrous bones (AIS-3), unspecified brain contusions (AIS-2), thin subdural hemorrhage (AIS-4), small lacerations of the right orbital and inferior temporal lobes (AIS-4), and focal subarachnoid hemorrhage (AIS-3).

As the vehicle came to rest within the confines of the intersection, the driver (mother) removed the infant from the fractured restraint and cradled the child at the scene of the crash. Neighbors at the

crash site assisted the driver and offered an adjoining house as shelter while awaiting the arrival of emergency personnel. The investigating officer noted that the driver initially refused to allow paramedics and police to examine and treat the infant. She subsequently relinquished the infant to paramedics who transported her to a [REDACTED] center where she expired following arrival. An autopsy was performed on the day following the crash. The medical examiner noted that there were no external injuries to the infant and that the infant was extremely small for the age of 7 weeks.

The integral 3-point harness of the child restraint was intact within the shell of the restraint with the latchplate buckled into the center mounted buckle unit at the time of vehicle inspection. The center plastic shoulder belt clip was positioned near the latchplate with the belts twisted between the clip and the buckle. Body fluid stains (blood) were prominent on the belt webbing. Based on these stains and the position of the buckle assembly, the infant was probably restrained in the rear-facing child restraint with the belts positioned around her body. In addition, the vehicle's 3-point lap and shoulder belt webbing was positioned through the upper loops of the restraint, however, the latchplate was not buckled into the mid mounted buckle assembly. The driver probably attempted to unbuckle the manual belt webbing in an attempt to remove the child from the restraint. She was subsequently charged with an alcohol related driving offense and the death of her daughter.

CRASH SCHEMATIC
CALSPAN CASE NO. 96-16
LOCATION: FLORIDA
CRASH DATE: [REDACTED] 1996



CALSPAN ON-SITE AIR BAG/CHILD FATALITY INVESTIGATION

CALSPAN CASE NO. 96-16

VEHICLE: 1996 DODGE CARAVAN

LOCATION: FLORIDA

CRASH DATE: [REDACTED], 1996

CRASH DATA

Location: Four-leg intersection
State: Florida
Area/Type: Urban/Residential
Crash Date/Time: [REDACTED] 1996, nighttime hours
Investigating Police Agency: [REDACTED]
Crash Type: Minivan/car, front-to-side impact configuration
Air Bag Vehicle Occupant Injury Severity: Driver - Not injured
Right Front Passenger - Fatal outcome (AIS-4)

AMBIENCE

Viewing Conditions: Dark, not lighted
Weather: Overcast
Precipitation: Rain
Road Surface: Wet

HIGHWAY



	<u>Air Bag Vehicle</u>	<u>Vehicle #2</u>
Type:	Local street	Local street
Number of Lanes:	2	2
Width:	6.4 m (21.0')	7.2 m (23.6')
Surface:	Asphalt	Asphalt
Median:	None	None

Edge:	North edge - sand/grass South edge - sand/grass	West edge - asphalt/grass East Edge - grass/sidewalk
Vertical Alignment:	Level	Level
Horizontal Alignment:	Straight	Straight
Estimated Coefficient of Friction:	.60	.60
Traffic Density:	None	None

TRAFFIC CONTROLS

	<u>Air Bag Vehicle</u>	<u>Vehicle #2</u>
Signals:	None	None
Signs:	Stop sign	None
Markings:	None	None
Speed Limit:	48 km/h (30 mph)	48 km/h (30 mph)

VEHICLES

	<u>Air Bag Vehicle</u>
Description:	1996 Dodge Caravan, 7 passenger configuration minivan
V.I.N.:	 (production number omitted)
Date of Manufacture:	 96
Color:	White
Odometer:	Unknown
Engine:	2.4 liter, 4 cylinder
Transmission:	Automatic, column mounted transmission selector lever
Steering:	Power-assisted
Brakes:	Power-assisted front disc/rear drum, no anti-lock (ABS)
Padding:	Upper and mid instrument panel, soft-edged steering wheel rim and air bag module covers, side door panels, door armrests, captain's chair center fold-down armrests, sunvisors, headliner, integral head restraints

Manual Restraints:	Three-point continuous loop lap and shoulder belt systems in the front seated positions with single mode inertia activated locking retractors and adjustable D-rings. Three-point lap and shoulder belt systems in the outboard positions of the second and third seats with a center lap belt for the third seat.
Automatic Restraints:	Driver and passenger side air bag Supplemental Restraint System (SRS) which deployed as a result of the frontal impact with the right side of the 1966 Chevrolet.
Defects:	None
Tow Status:	Towed due to vehicle damage

Vehicle #2

Description:	1966 Chevrolet Impala, 2-door hardtop
V.I.N.:	166476D (production number omitted)
Date of Manufacture:	Not recorded
Color:	Blue
Odometer:	186,239 km (115,727 miles)
Engine:	V-8
Manual Restraints:	None, removed
Defects:	None
Tow Status:	Towed due to vehicle damage

VEHICLE DAMAGE

Exterior:

Air Bag Vehicle

The full frontal area of the Dodge Caravan impacted the right rear quarter panel of the 1966 Chevrolet Impala which resulted in moderate damage to the Caravan. The impact separated the front bumper fascia from the reinforcement bar, therefore the crush profile was documented at the face of the reinforcement bar. Maximum crush was 32.4 cm (12.75") located 12.1 cm (4.75") right of the vehicle's centerline. The crush values at the bumper reinforcement bar were as follows: C₁= 4.1 cm (1.6"), C₂= 16.3 cm (6.4"), C₃= 26.9 cm (10.1"), C₄= 32.4 cm (12.75"), C₅= 16.0 cm (6.3"), C₆= 11.7 cm (4.6").

VEHICLE DAMAGE (CONT'D.)

Exterior (Cont'd.):

Air Bag Vehicle

Components damaged by the crash included the front bumper fascia, bumper reinforcement bar, grille, hood, upper radiator support panel, and the right front fender.

CDC: 11-FDEW-2

Repair Cost: \$4,000.00 (police estimate)

Exterior:

Vehicle #2

The Chevrolet Impala sustained moderate damage to the right rear quarter panel from its impact sequence with the Dodge Caravan. Maximum crush was 15.2 cm (6.0") located 41.9 cm (16.5") forward of the right rear axle. The direct contact damage began 72.4 cm (28.5") forward of the right rear axle and extended 188.0 cm (74.0") rearward. The combined induced and direct contact damage began at the left B-pillar and extended 215.6 cm (84.9") rearward to the trailing end of the quarter panel. The crush profile was documented at a height of 61.0 cm (24.0") above ground level (mid-door level) and was as follows: $C_1 = 0$ cm (0"), $C_2 = 13.3$ cm (5.25"), $C_3 = 11.4$ cm (4.5"), $C_4 = 8.6$ cm (3.4"), $C_5 = 13.3$ cm (5.25"), $C_6 = 1.9$ cm (0.75").

In addition to the right rear quarter panel damage, the left rear tire and wheel were damaged due to the post-crash rotation of the vehicle. The outboard aspect of the tire bead separated from the rim resulting in an air out of the tire and gouging of the sidewall. The aftermarket steel wheel was gouged from contact with the asphalt road surface during the post-crash spin-out.

Interior:

Air Bag Vehicle

Interior damage to the Dodge Caravan was limited to the deployment of the driver and passenger side air bag system and the subsequent damage that resulted to the rearward-facing infant restraint. There was no occupant contact damage or intrusion of interior components.

The driver's side air bag deployed as designed from the H-configuration module cover flaps. A blood and dirt-like stain was noted to the mid right side of the driver bag. This stain occurred post-crash as the driver attended to the injured infant right front occupant. It should be noted that the steering wheel was rotated 180 degrees at the time of our inspection and remained in this position for the photographic documentation which is included as Attachment A of this report.

VEHICLE DAMAGE (CONT'D.)

Interior (Cont'd.):

Air Bag Vehicle

The passenger side air bag deployed from the symmetrical flap configuration module that was mounted within the mid instrument panel of the vehicle. The passenger side air bag membrane and the upper module cover flap exhibited evidence of contact with the back side of the rearward-facing Century infant restraint. A 5.1 cm (2.0") vertically oriented tear was noted to the bottom panel of the passenger side air bag. The frayed fabric ends were singed from the hot gas venting through the tear point. The contact evidence is identified in the Automatic Restraint System section of this report.

In addition to the passenger side air bag contact evidence, an oily semi-circular transfer was located on the windshield 12.7-19.7 cm (5.0-7.75") right of center and 33.0-43.2 cm (13.0-17.0") above the top surface of the upper instrument panel. An inverted U-shaped transfer, which was a possible passenger side air bag fabric transfer, was located on the windshield 33.0-39.4 cm (13.0-15.5") right of center and 40.6-45.7 cm (16.0-18.0") above the top surface of the upper instrument panel. A horizontal white vinyl transfer was noted to the black plastic trim of the mid instrument panel and the center vent louver located 10.2-16.5 cm (4.0-6.5") right of center. This transfer resulted from probable contact by the carrying handle rear facing child restraint. Body fluid stains (blood) were noted on the right front lap belt segment that extended across the rearward-facing child restraint. The stains were located 69.9-88.9 cm (27.5-35.0") above the floor anchorage. The glove compartment door was open at the time of inspection and the right vent louver was separated from its instrument panel mount. Both components were displaced from distortion of the instrument panel which resulted from the deployment of the passenger side air bag system against the restraint. The fabric headliner above the right front seat had two small tears which probably resulted from fragments of the plastic shell of the child restraint.

AUTOMATIC RESTRAINT SYSTEM

The 1996 Dodge Caravan was equipped with a Supplemental Restraint System (SRS) that consisted of dual driver and passenger side air bags which deployed as a result of the front-to-side crash sequence with the Chevrolet Impala. The driver side air bag was incorporated into the steering wheel hub assembly in a typical configuration while the passenger side air bag was mounted into the mid right instrument panel of the Caravan.

The driver side air bag deployed as designed from an H-configuration asymmetrical air bag module cover assembly that was contained within the three-spoke steering wheel assembly. At the time of vehicle inspection, the steering wheel was rotated 180 degrees, however, all documentation relating to the driver side air bag is referenced as though the wheel was in a straight ahead 12/6 o'clock position. The H-configuration flaps opened at the designated horizontal and vertical tear points and were hinged at the top and bottom. The upper module cover flap had an overall height of 4.4 cm (1.75") and was 17.6 cm (6.9") wide at

AUTOMATIC RESTRAINT SYSTEM (CONT'D.)

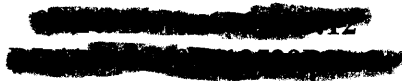
the center tear seam. At 1.9 cm (0.75") above the tear seam, the sides of the cover flap curved inward to the hinge width of 13.3 cm (5.25"). The lower module cover flap was also 17.6 cm (6.9") wide with a height of 9.5 cm (3.75"). Both sides of the flap narrowed 7.0 cm (2.75") below the center tear seam to the lower hinge width of 7.6 cm (3.0"). The upper cover flap was approximately 0.3 cm (0.125") in thickness while the lower flap was 0.6 cm (0.25") thick. SRS AIRBAG were molded into the lower cover flap below the Chrysler logo.

The driver side air bag was approximately 67.3 cm (26.5") in diameter in its deflated state and was constructed of two independent fabrics. The outer panel (panel facing the driver) was a typical woven nylon fabric with an apparent liner coating on the inner surface while the woven nylon inner panel was lighter in weight and porous. There were no vent ports in the bag, therefore the bag probably exhausted through the porous inner panel. The bag was tethered by two internal tether straps at the 3 and 9 o'clock positions. The tether strap reinforcement was sewn to the face of the bag with a double row of circular red stitching in a 16.5 cm (6.5") diameter pattern. A bar coded identification label was sewn to the bag at the 6 o'clock sector adjacent to the inflator. The labeling was as follows:



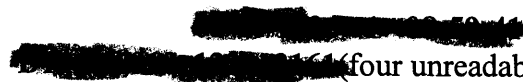
There was no driver contact evidence on the driver side air bag. A 5.1 x 11.4 cm (2.0 x 4.5") warning label was on the back side of the left sun visor with no advisory label on the exposed side of the visor. The warning label is documented in Photograph No. 44 of Attachment A. The integral vanity mirror in the left sunvisor was intact.

The passenger side air bag assembly was a mid mount configuration, incorporated within the contour of the right instrument panel. The module was concealed behind two symmetrical cover flaps which opened in an H-configuration. The cover flaps opened as designed along the center horizontal tear seam and side surfaces with top and bottom hinges for the respective cover flaps. The symmetrical vinyl cover flaps measured 28.3 cm (11.1") horizontally and 6.4 cm (2.5") vertically. SRS AIR BAG was molded into the lower right quadrant of the upper cover flap. The upper cover flap was bowed outward 1.5 cm (0.6") at the midpoint by the deploying air bag as the rearward-facing child restraint impeded the deployment path of the bag membrane. The underside of the lower cover flap had a bar coded label with the following information:



AUTOMATIC RESTRAINT SYSTEM (CONT'D.)

The underside of the upper cover flap had a similar bar coded label with the following:

 (four unreadable characters)

The face of the passenger side air bag module upper cover flap had heavy white vinyl transfers from contact with the back of the rearward-facing infant restraint. These transfers extended across the entire face of the upper flap. Two transfers that were 2.5 cm (1.0") in height were located on the outboard aspects of the upper flap as a result of contact with the child restraint handle. They were both located 3.3 cm (1.3") above the center tear point with the left transfer extending 5.1 cm (2.0") inboard of the left edge and the other transfer extending 14.0 cm (5.5") inboard of the right vertical edge. The plastic carry handle of the child restraint was completely fractured at the midpoint with a 10.2 cm (4.0") section separated by the upper air bag module flap. Also located on the upper module flap were four vertically oriented white vinyl transfers which matched to the four vertical reinforcements of the back side of the plastic shell of the restraint. The vertical heights from left to right were as follows: 1.3 cm (0.5"), 3.8 cm (1.5"), 3.2 cm (1.25"), and 3.2 cm (1.25"). The respective lateral locations from the left vertical edge of the cover flap were as follows: 3.2 cm (1.25"), 6.4 cm (2.5"), 17.1 cm (6.75"), and 21.6-24.1 cm (8.5-9.5"). The lower air bag module cover flap had a white vinyl transfer located at the upper left corner which extended downward 1.9 cm (0.75") from the center tear seam and 2.5 cm (1.0") right of the left vertical edge. A 2.5 cm (1.0") vertical black vinyl transfer was located along the upper tear seam 7.6-4.4 cm (3.0-1.75") inboard of the right vertical edge.

The passenger side air bag was a non-tethered bag with no vent ports. The bag probably exhausted through the porous membrane. The rearward excursion of the passenger side air bag was 58.4 cm (23.0") from the module and 45.7 cm (18.0") from the protruding mid instrument panel. The throat of the bag extended 25.4 cm (10.0") outboard of the inflator to the seam attaching the bag to the inflator assembly. The wide band of stitching was used as a reference point to locate contact evidence that was observed on the bag. The vertical height of the face of the bag was 68.6 cm (27.0") and the width was 47.0 cm (18.5"). Vertically oriented blue cloth transfers were noted on the passenger side air bag from contact with the fabric liner of the child restraint. A 5.1 cm (2.0") long vertical tear was located on the left side of the bag at the stitched seam. The frayed edges of the tear were scorched from the hot gas exhausting from the bag (refer to Photograph No. 59).

MANUAL RESTRAINTS

The Dodge Caravan was equipped with manual 3-point lap and shoulder belt systems in the front seated positions. The belt systems consisted of a single mode inertia-activated locking retractor with a continuous loop belt webbing on a sliding latchplate. Both front belt systems were equipped with adjustable D-rings. The driver side adjustable D-ring had 9.5 cm (3.75") of vertical adjustment and was adjusted to the lowest position. The right front D-ring was also set to the lowest position. The lower anchorage of the belt webbings were mounted to the sills of the vehicle. The driver side latchplate had routine wear marks which indicate frequent usage, however, the belt system exhibited no evidence of loading. The right belt webbing was looped through the child restraint with the latchplate unbuckled (refer to Photograph No. 77). Body fluid (blood) was noted on the right front lap belt 69.9-88.9 cm (27.5-35.0") above the floor anchorage.

CHILD RESTRAINT

The infant restraint was a rearward-facing Century Model No. [REDACTED] that was positioned in the right front of the Dodge Caravan. The restraint was manufactured on [REDACTED]/94. Positioning and usage warning labels were affixed to the lateral aspects of the plastic shell, however, there was no air bag warning labels on the Century infant restraint. The restraint was equipped with an adjustable carrying handle that was mounted to the mid aspect of the shell. The restraint was equipped with an integral 3-point harness system to secure a infant within the shell of the restraint. A plastic chest clip was affixed to the belt webbings to position the belts across the shoulders and torso of the child within the harness system. The harness was equipped with a latchplate that buckled into position between the child's legs. An adjustment for the shoulder harness was located on the back of the child restraint. The harness belts were positioned in the upper adjustment slots which were designed for a larger infant. The child safety seat was covered with a thick multi-color padded seat covering made of a polyester fabric. Underlying the covering was a dense 2.1 cm (0.8") thick foam padding. In addition to the OEM covering, an aftermarket head support collar was utilized by the driver to support the head of the 7 week old infant. A level indicator was attached to left side of the restraint shell which contained a ball which rolled into a green sector when the restraint was installed correctly and into a red zone when installed incorrectly (refer to Photograph No. 73).

The Century infant restraint was equipped with a detachable base. The base was not used by the driver on this crash related trip. The base was found on the rear floor area of the vehicle and was not damaged. The vehicle's lap belt webbing was properly looped through the designated slots that were incorporated into the top of the plastic shell (refer to Photograph No. 78).

The restraint was positioned between the seat back support and the mid mount passenger side air bag module assembly. At impact, the deploying air bag and symmetrical cover flaps contacted the upper aspect of the shell. The contact fractured the shell in both the vertical and longitudinal directions. The lower outboard aspect of the restraint had a 21.6 x 17.8 cm (8.5 x 7.0") section that was completely separated from the shell.

COLLISION SEQUENCE

Pre-Crash:

The 37 year old female driver of the 1996 Dodge Caravan (Vehicle #1) secured her 7 week old female infant in a rearward-facing Century infant restraint in the right front position of the vehicle. The restraint was secured in the vehicle with the manual lap belt and the infant was secured in the restraint with the integral 3-point harness. The right front seat track was adjusted to the full forward position with the seat back reclined to 25 degrees at the lumbar support region. The upper area of the child restraint was positioned against the mid mount passenger side air bag module cover flaps. The driver was not wearing the manual 3-point lap and shoulder belt system.

The driver of the Dodge Caravan was traveling in a westerly direction on an approach to a four-leg intersection at a police reported speed of 32 km/h (25 mph). East/westbound traffic flow through the intersection was controlled by stop signs. The driver apparently failed to detect the stop sign and proceeded into the intersection to continue in an westerly direction. The 1996 Chevrolet Impala was traveling in a northerly direction on an intersecting roadway at a police reported speed of 32 km/h (25 mph). There were no traffic controls for north/southbound traffic flow. The driver of the Caravan probably braked immediately prior to impact, however, there was no evidence of avoidance actions (i.e., skid marks) observed at the crash scene.

Crash:

The full frontal area of the Dodge Caravan struck the right rear quarter panel of the Chevrolet Impala. Resultant directions of force were 11 o'clock for the Dodge Caravan and 2 o'clock for the Chevrolet Impala. Velocity estimates were computed by the damage algorithm of the SMASH program at 19 km/h (12 mph) for the Dodge Caravan and 18 km/h (11 mph) for the struck Chevrolet Impala. The longitudinal component of -17 km/h (-11 mph) was sufficient to deploy the Caravan's supplemental driver and passenger side air bag system.

The lateral component of the impact force rotated the Caravan in a clockwise (CW) direction on the wet asphalt road surface. The vehicle's center of gravity (CG) continued in a westerly direction as the Caravan rotated approximately 104 degrees CW. A left front tire scuff evidenced the trajectory of the vehicle and its final rest position was documented by the investigating police officers.

The 1966 Chevrolet Impala was impacted rearward of its CG location which induced a CW rotation to the vehicle. The vehicle's CG traveled approximately 18 m (59') in a westerly direction on the asphalt road surface as the vehicle rotated approximately 79 degrees CW. The left rear tire sustained an air out during the rotation which allowed the aftermarket steel wheel to gouge against the asphalt road surface which resulted in superficial damage to the wheel and tire.

COLLISION SEQUENCE (CONT'D.)

Post Crash:

Final Rest -

The Dodge Caravan came to rest approximately 4.5 m (14.8') forward of it at impact position. At rest, the vehicle was positioned near the mid point of the intersection facing in a northerly direction. The 1966 Chevrolet Impala came to rest approximately 11.2 m (37.1') east of its impact position. At rest, the Impala was facing in an easterly, perpendicular to the roadway.

Driver Activities -

Immediately following the crash, the driver of the Dodge Caravan removed the infant from the child restraint and the vehicle. Local residents notified police of the crash and offered their house as shelter to the driver of the Caravan from the inclement weather. As police and rescue personnel arrived on-scene, the driver initially prevented emergency personnel from attending to her injured infant. The driver of vehicle #2 remained at the scene and waited for the arrival of the police.

Rescue Activities -

Rescue personnel subsequently transported the child to a [REDACTED] center where she expired on-arrival. Driver #2 was transported by ambulance to a [REDACTED] where he was treated for minor injuries and released.

Police Activities -

The driver of the Dodge Caravan was transported by police to police headquarters where she was administered an alcohol test. She was subsequently charged with an alcohol related driving offense and the death of her child. It should be noted that this driver was [REDACTED] of a previous child restraint [REDACTED]

Scene Clearance -

Both vehicles sustained disabling damage and were towed from the scene.

HUMAN DEMOGRAPHICS/OCCUPANT DATA

Air Bag Vehicle

	Driver	Right Front Occupant
Age/Sex:	37 year old female	7 week old female
Height:	167.6 cm (66.0")	53.3 cm (21.0")
Weight:	63.5 kg (140.0 lbs)	4.5 kg (10.0 lbs.)
Manual Restraint System Usage:	Not wearing the lap and shoulder belt system	Rear-facing infant restraint secured with the right front lap belt
Usage Source:	Police accident report and vehicle inspection	Vehicle inspection
Eyewear:	Unknown	None
Vehicle Familiarity:	Unknown	
Route Familiarity:	Unknown	
Trip Plan:	Returning to residence	
Type of Medical Treatment:	None	Transported by ambulance to a local trauma center where she expired on- arrival

DRIVER INJURIES

Injury	Injury Severity (AIS-90)	Injury Mechanism
Not injured	N/A	N/A

DRIVER KINEMATICS

The driver of the Dodge Caravan was presumably in a normal upright position at impact with the Chevrolet Impala with her seat adjusted to a mid-track position, 10.8 cm (4.25") rearward of the full forward position. The seat back was reclined to 25 degrees measured at the lumbar support region. She was not wearing the manual 3-point lap and shoulder belt system. There was no loading evidence on the belt system and there were minimal wear marks from routine usage. At impact the driver initiated a trajectory in response to the 11 o'clock impact force and loaded the deployed driver's side air bag which prevented her from possible injury with the steering wheel assembly and/or windshield.

RIGHT FRONT OCCUPANT INJURIES

Injury	Injury Severity (AIS-90)	Injury Mechanism
Transverse fracture of the skull that extended from side-to-side parallel to, rearward, and close to the coronal suture line	Moderate (150402.25)	Deploying passenger side air bag and module cover flaps
Skull fracture extends and branches in the right middle cranial fossa and petrous bones with a branching linear fracture of the right orbital plate	Serious (150202.38)	Deploying passenger side air bag and module cover flaps
Thin subdural hemorrhage over the convexity of the brain	Severe (140650.42)	Deploying passenger side air bag and module cover flaps
Subdural hemorrhage in the middle cranial fossa, more of the right	Severe (140650.41)	Deploying passenger side air bag and module cover flaps
Small lacerations of the right orbital and inferior lobes of the brain	Severe (140688.41)	Deploying passenger side air bag and module cover flaps
Focal subarachnoid hemorrhages	Severe (140684.31)	Deploying passenger side air bag and module cover flaps
Unspecified brain contusions	Serious (140602.39)	Deploying passenger side air bag and module cover flaps
Scalp hemorrhages of the posterior and superior aspects	Minor (190402.16, 190402.15)	Deploying passenger side air bag and module cover flaps

RIGHT FRONT OCCUPANT KINEMATICS

The 7 week old female passenger was positioned in a rearward-facing Century Model ~~XXXXXX~~ infant restraint. She was probably properly secured by the integral 3-point harness. Although the position of the infant in the restraint was not witnessed by emergency personnel on-scene, blood stains on the webbing supported usage of the harness system. The infant restraint was secured in the right front passenger seat by the manual lap belt. The manual belt webbing was positioned through the upper loops of the child restraint. The D-ring for the right front belt system was adjusted to the lowest position. The restraint was designed with a detachable base, however, the base was not used. The base was found in the rear floor area of the vehicle. The right front seat track was adjusted to the full forward track position with the seat back reclined to 25 degrees at the lumbar support region. This seat track position placed the upper aspect of the infant restraint against the mid-mount passenger side air bag module assembly with the infant's head resting in the vicinity of the air bag module cover flaps.

At impact, the driver and passenger side air bag system deployed. The passenger side air bag module cover flaps opened against the back side of the plastic shell of the rearward-facing infant restraint. The symmetrical H-configuration module cover flaps, in combination with the deploying air bag membrane, fractured the back side of the plastic shell of the infant restraint and accelerated the restraint in a rearward direction with respect to the vehicle. White vinyl-type transfers were noted across the full width of the upper module cover flap. Two similar transfers were noted to the upper corner areas of the lower cover flap. The deploying air bag subsequently contacted the shell of the restraint, which in combination with the cover flap contact, severely fractured the restraint in both the lateral and longitudinal directions.

As a result of air bag deployment against the infant restraint, the infant sustained a transverse fracture of the skull that extended from side-to-side parallel to, rearward, and close to the coronal suture line, a fracture that branched into the right middle cranial fossa and petrous bones and into the right orbital plate, thin subdural hemorrhage over the convexity of the brain, subdural hemorrhage in the middle cranial fossa, small lacerations of the right orbital and inferior lobes of the brain, focal subarachnoid hemorrhages, unspecified brain contusions, and scalp hemorrhages of the posterior and superior aspects.

The integral harness restrained the infant within the fractured infant restraint as the vehicle came to rest near the point of impact. Based on evidence within the restraint and statements from the investigating officer, the infant was bleeding from the ear onto the harness webbing and padding of the restraint. The driver (mother) unfastened the vehicle's manual belt system in an attempt to remove the infant from the vehicle. She subsequently released the integral harness buckle mechanism and removed the infant from the restraint and the vehicle. She exited the Dodge Caravan and cradled the infant while awaiting the arrival of emergency personnel.

RIGHT FRONT OCCUPANT MEDICAL TREATMENT

The investigating officer stated that as police and paramedics arrived on-scene and located the driver of the Caravan in a neighboring house adjacent to the crash scene, the driver (mother) was holding the infant and refused to allow anyone near her or the child. He noted that paramedics were subsequently successful in retrieving the infant from the mother. They immediately determined that the infant was not breathing and prepared her for transport to a [REDACTED] where she expired no-arrival. The body was transported to the [REDACTED] office for an autopsy.

ATTACHMENT A

Selected Color Photographs



1. Pre-crash trajectory of the 1996 Dodge Caravan.



2. Trajectory of the Dodge Caravan at 30 m (100') prior to impact.



3. Trajectory of the Dodge Caravan at 15 m (50') prior to impact.



4. Point of impact.



5. Post-impact rotational trajectory to final rest position of the Dodge Caravan.



6. Lookback view of the Dodge Caravan's path of travel.



7. Pre-crash trajectory of the 1966 Chevrolet Impala at 30 m (100') prior to impact.



8. Trajectory of the Chevrolet Impala at 15 m (50') prior to impact.



9. Trajectory of the Chevrolet Impala at point of impact.



10. Final rest of the Chevrolet Impala.



11. Perpendicular view of final rest position of the Chevrolet Impala.



12. Lookback view of the Chevrolet Impala's path of travel.



13. Frontal view of the impact damage to the 1996 Dodge Caravan.



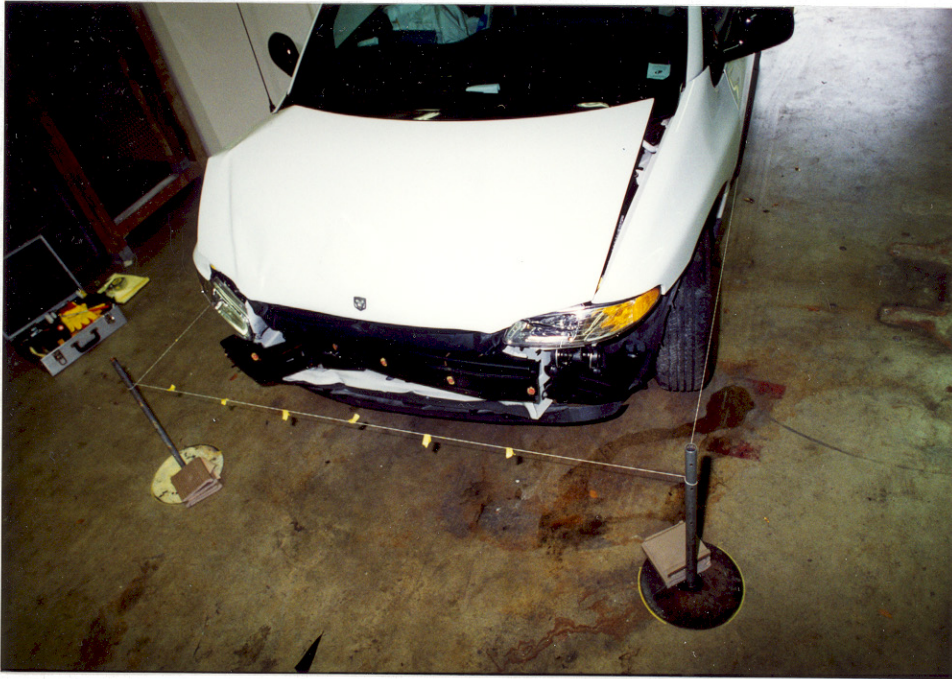
14. View of the front bumper fascia of the Dodge Caravan.



15. Close-up view of the damage to the right corner of the front bumper fascia.



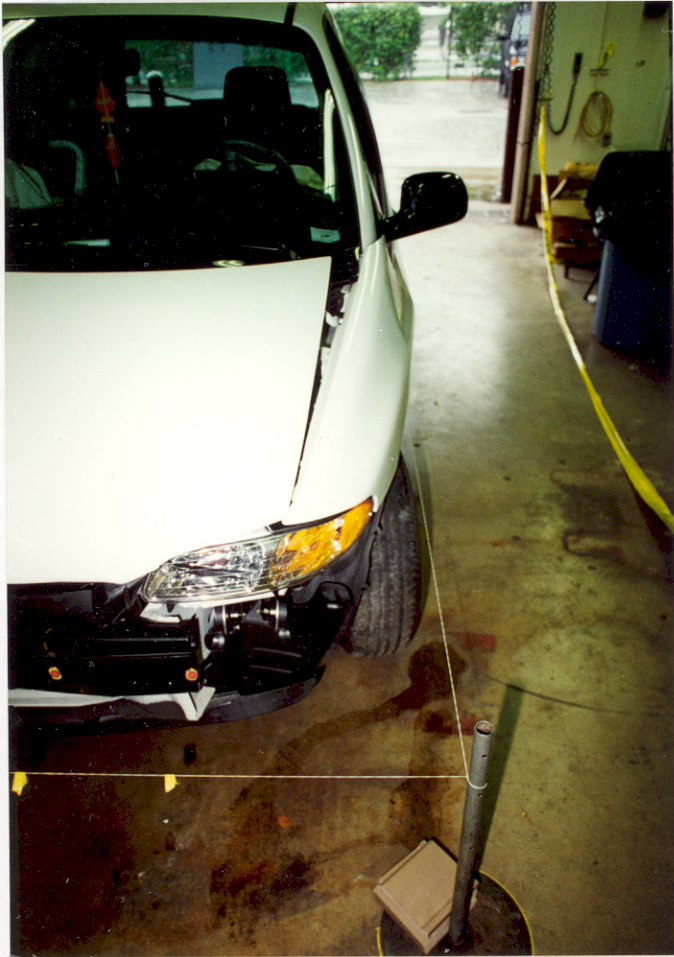
16. Close-up view of the damage to the left corner of the front bumper fascia.



17. Overhead view of the frontal damage to the Dodge Caravan.

18. Longitudinal view of the lateral displacement of the right front corner.





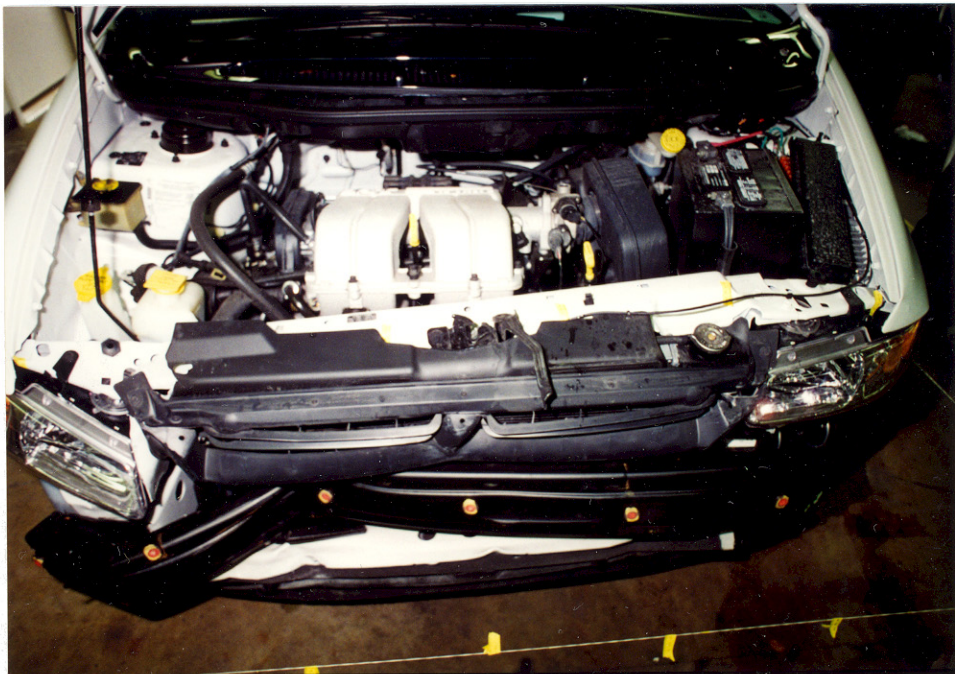
19. Longitudinal view of the lateral displacement of the left front corner.



20. Close-up view of the maximum crush to the bumper reinforcement bar of the Dodge Caravan.



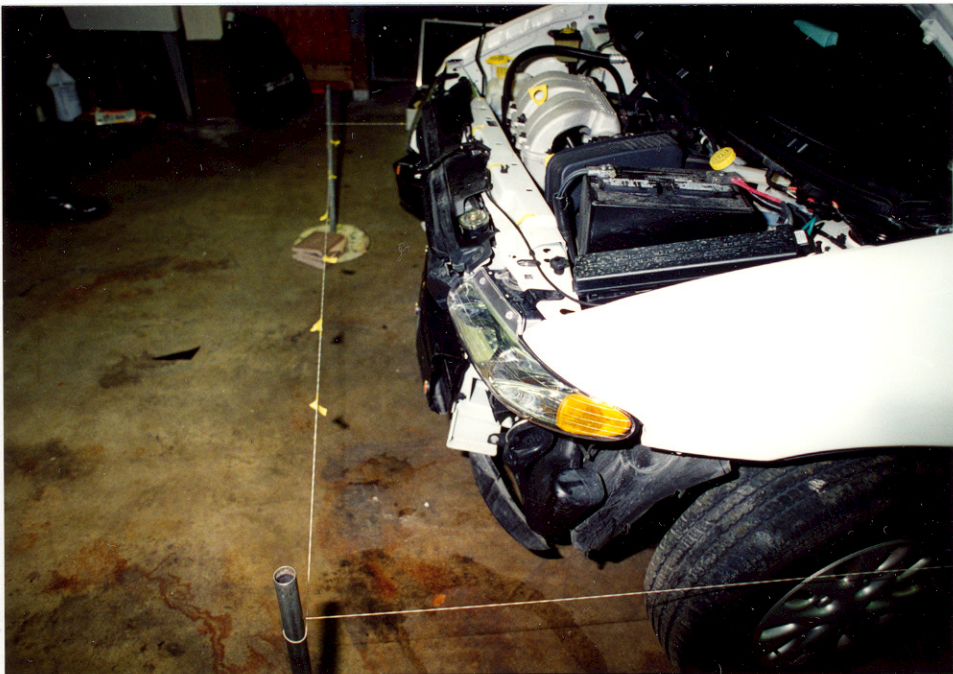
21. Left front three-quarter view of the Dodge Caravan.



22. Overhead view of the damage to the bumper reinforcement bar and upper radiator support bracket.



23. Perpendicular view of the frontal plane documenting the extent of crush.



24. Perpendicular view of the rearward displacement of the bumper reinforcement bar and upper radiator support bracket.



25. Left side view of the Dodge Caravan.



26. Left rear three-quarter view.



27. Right rear three-quarter view.



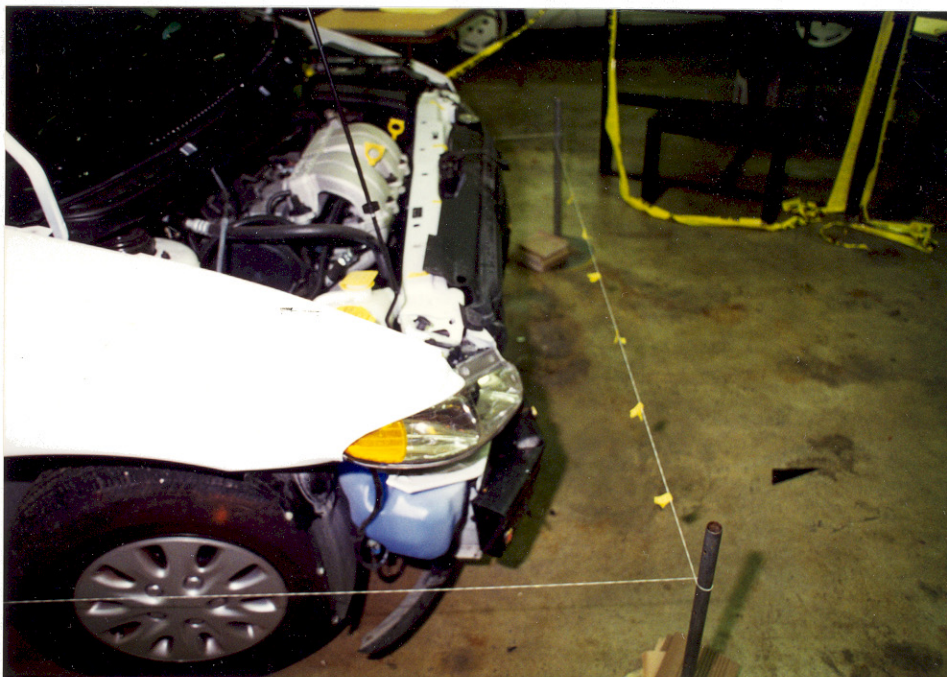
28. Right side view of the Dodge Caravan.



29. Right front three-quarter view of the Dodge Caravan.



30. Right front perpendicular view documenting the crush profile.



31. Right front perpendicular view of the rearward displacement of the bumper reinforcement bar and upper radiator support bracket.



32. Vehicle identification sticker located on the left front door.



33. Overall view of the driver's compartment and the deployed driver side air bag.



34. View of the driver side air bag module cover flaps.



35. Perpendicular view of the steering wheel.



36. Lateral view of the driver's adjusted seat track position.



37. Close-up view of the driver's knee bolster.

38. View of the deployed driver side air bag and sun visor.





39. View of the driver side air bag.



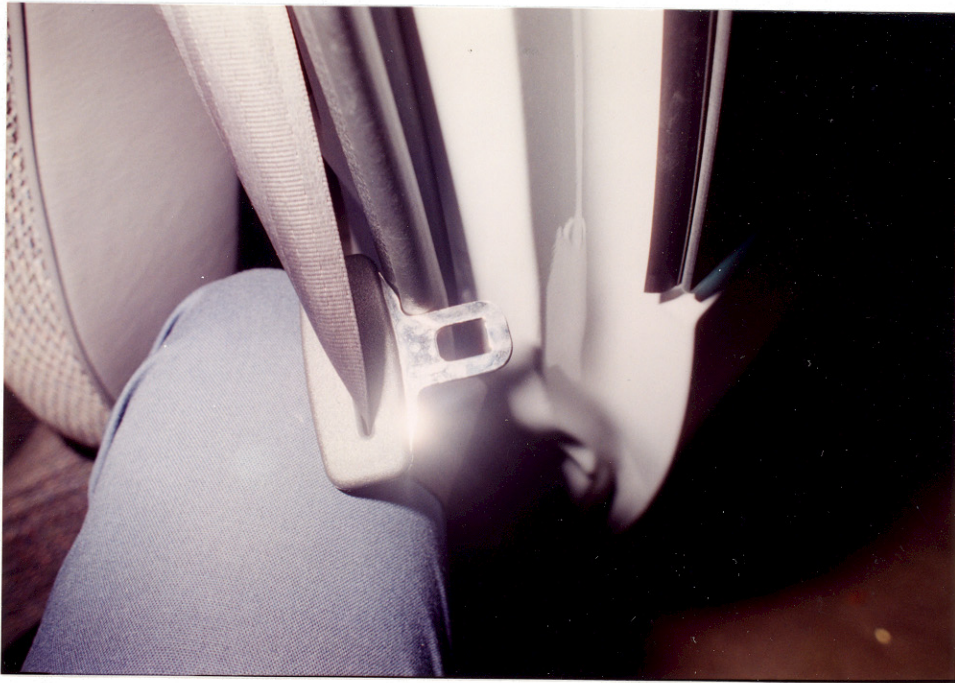
40. Identification label at the 6 o'clock sector of the driver side air bag.



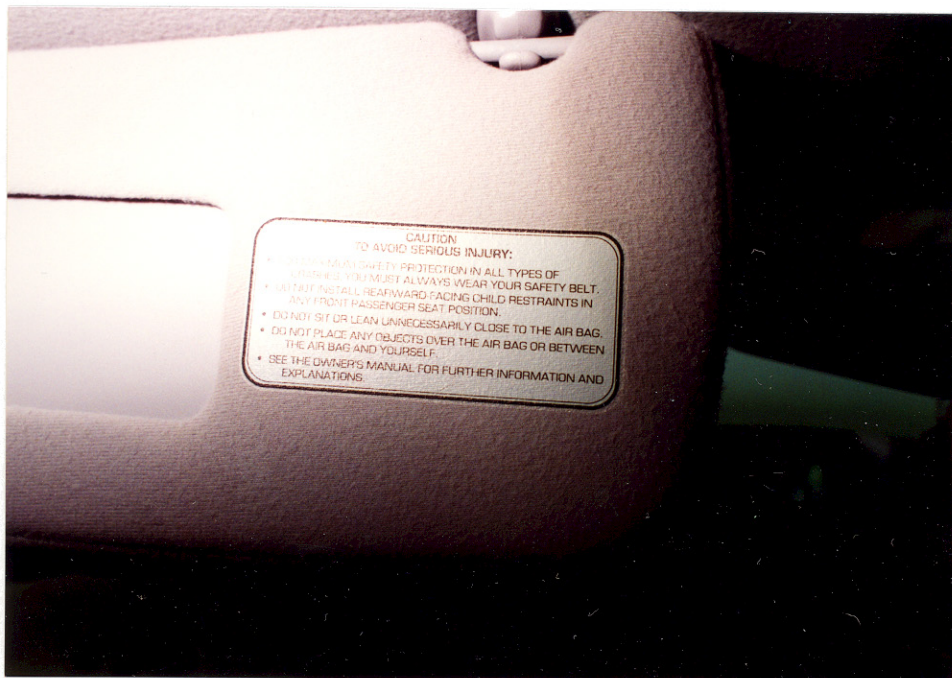
41. Driver's seat back and the manual belt system.

42. Driver's side manual 3-point seat belt system with D-ring adjusted to full down position.





43. Driver side latchplate showing minimal wear marks.



44. Air bag warning label on the top side of the left sun visor.



45. Overall view of the right front seat position and the deployed passenger side air bag.



46. Close-up view of the deployed passenger side air bag and cover flaps, right instrument panel, and the opened glove compartment door.



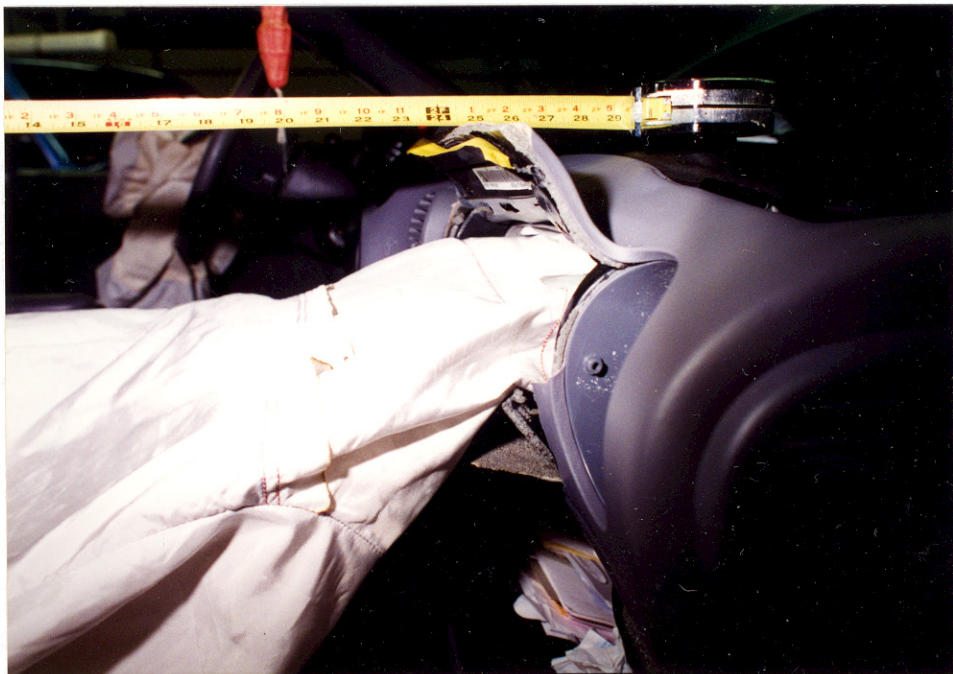
47. View of the face of the deployed passenger side air bag.



48. Rearward excursion of the non-tethered passenger side air bag.



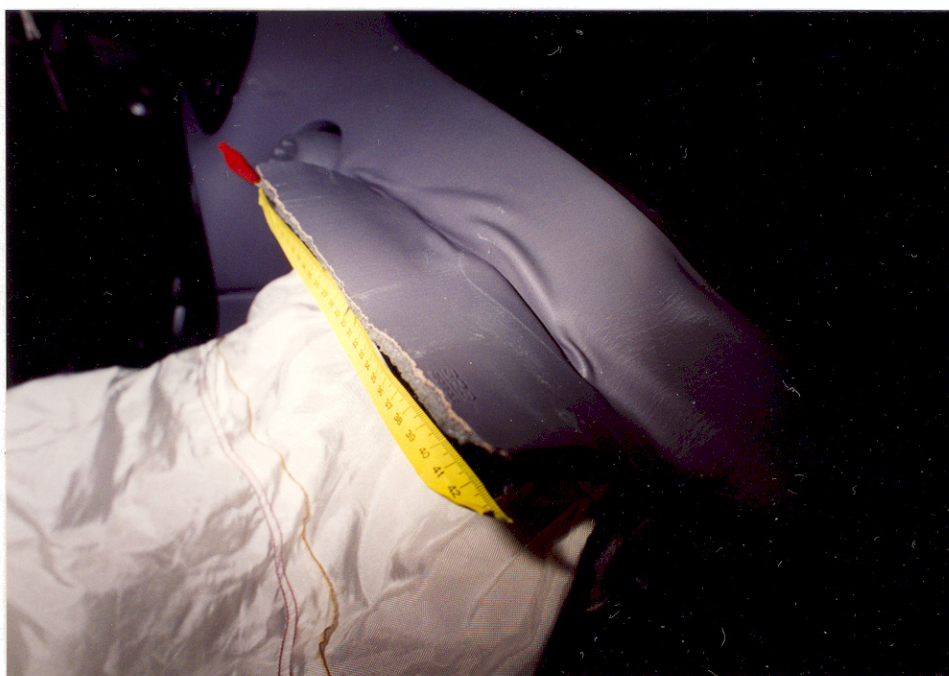
49. Horizontal measurement between the leading edge of the passenger side air bag module and the right seat back.



50. Close-up view of the 69 cm (27") distance between the right front seat back support to the air bag module assembly.



51. View of the top module cover flap and the displaced right vent louver.



52. Child restraint white vinyl transfers on the upper cover flap.



53. Passenger side air bag module lower cover flap and the open glove compartment door.



54. Overall view of the passenger side air bag.



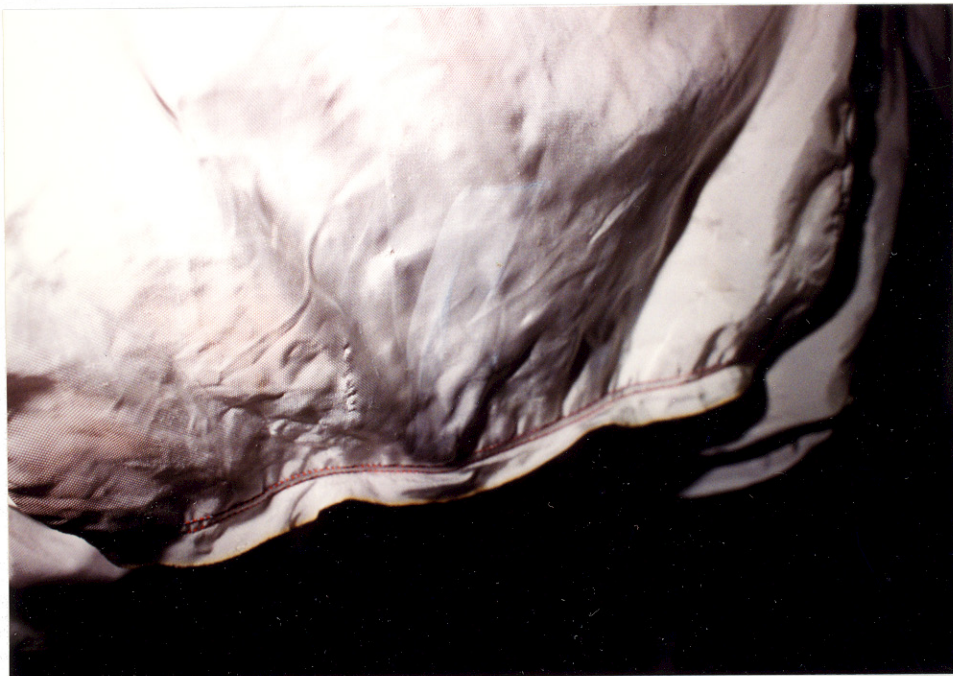
55. Bottom view of the passenger side air bag and the lower cover flap.



56. Overview of the lower face of the passenger side air bag.



57. Blue cloth transfer located on the bottom of the bag.



58. Close-up view of the blue cloth transfer.



59. Close-up view of the 5.1 cm (2.0") vertical tear on the left side of the passenger side air bag.



60. Grease-type semi-circular transfer and possible white vinyl transfer on windshield right of center.



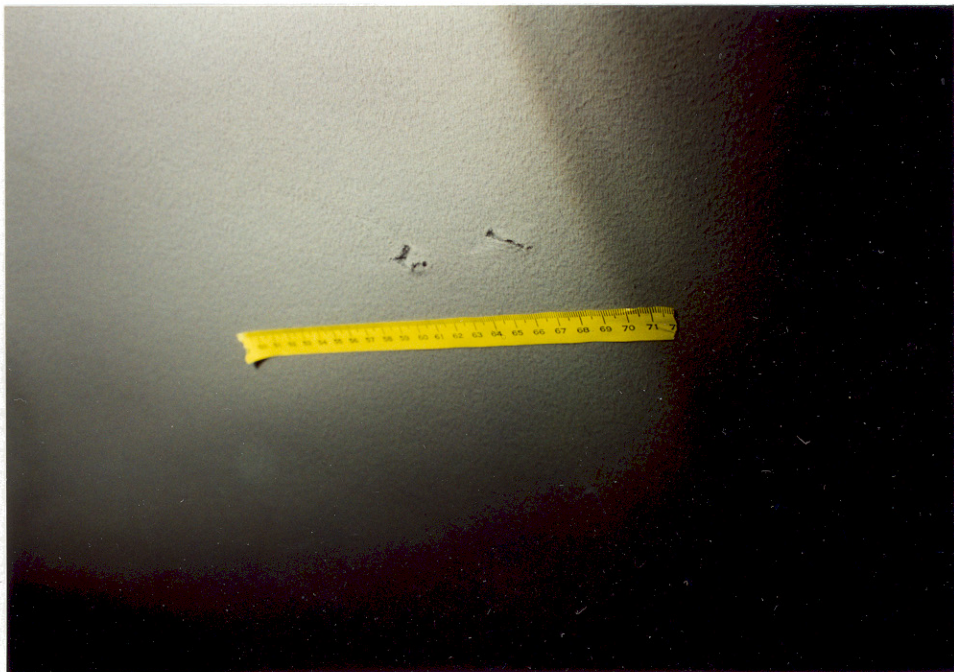
61. White vinyl transfer on center mid instrument panel 10.2-16.5 cm (4.0-6.5") right of center.



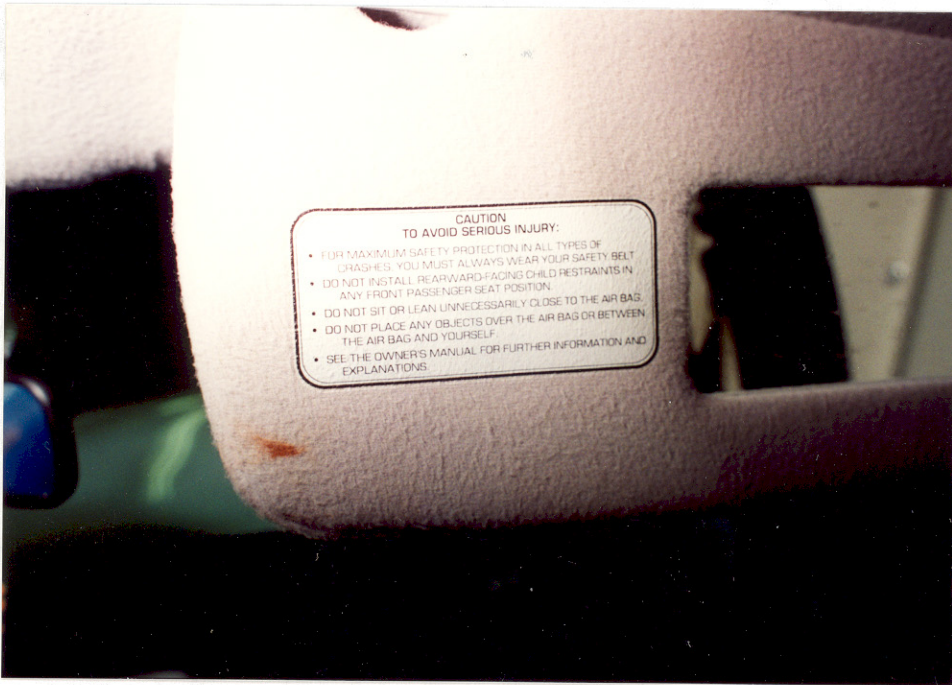
62. Full forward right front seat track adjustment in contact with open glove compartment door.



63. Two fabric tears on the roof area above the right front seat.



64. Close-up view of the fabric tears probably caused by fragments of the child restraint plastic shell.



65. Air bag warning label on the top side of the right sun visor.



66. View of the center and rear seated areas of the Dodge Caravan.



67. Child restraint travel base (not used) on the floor forward of the second seat.



68. Position of the rearward facing child restraint in the right front seat position.



69. Right front lap belt securing the child restraint in place at the time of the crash.



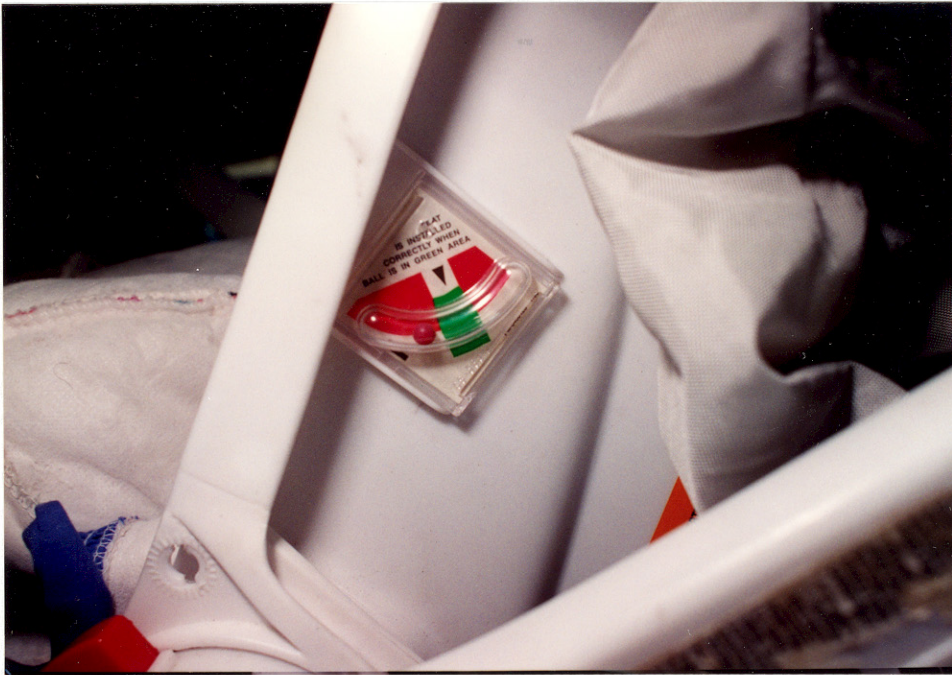
70. Close-up view of the child restraint positioned against the panel and mid-mount air bag module assembly.



71. View of the plastic shell fracture caused by the air bag module cover flaps.



72. View of the fractured child restraint handle against the upper module cover flap.



73. Level indicator on the plastic shell of the child restraint.



74. View from the left of the deployed air bag and the child restraint with the foam padding marking the approximate location of the infant's head.



75. Rear view of the rearward facing child restraint in the right front seat.



76. Close-up view of the deployed air bag and child restraint.



77. Unbuckled lap belt properly routed through shell of the restraint.



78. Overhead view of the lap belt routed through the right loop of the child restraint.



79. Right side (outboard) of the lap belt routed through the loop of the child restraint.



80. View of the right front seat track adjustment at the time of the crash.



81. Lower lap and shoulder belt anchorage for the right front seat.

82. Right front seat D-ring adjustment, full-down position.





83. Frontal view of the Century child restraint removed from the vehicle.



84. Close-up view of the Century child restraint and integral 3-point harness.



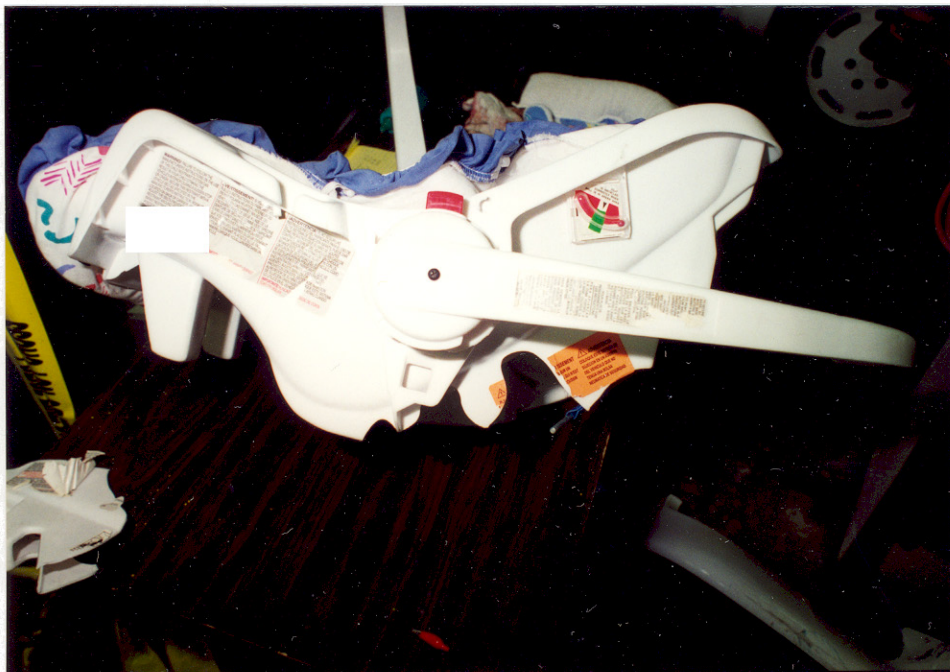
85. Additional view of the three-point restraint harness with chest clip and center buckle assembly.



86. Aftermarket infant head support collar.



87. Warning label on left side of child restraint. Label did not reference air bag warnings.



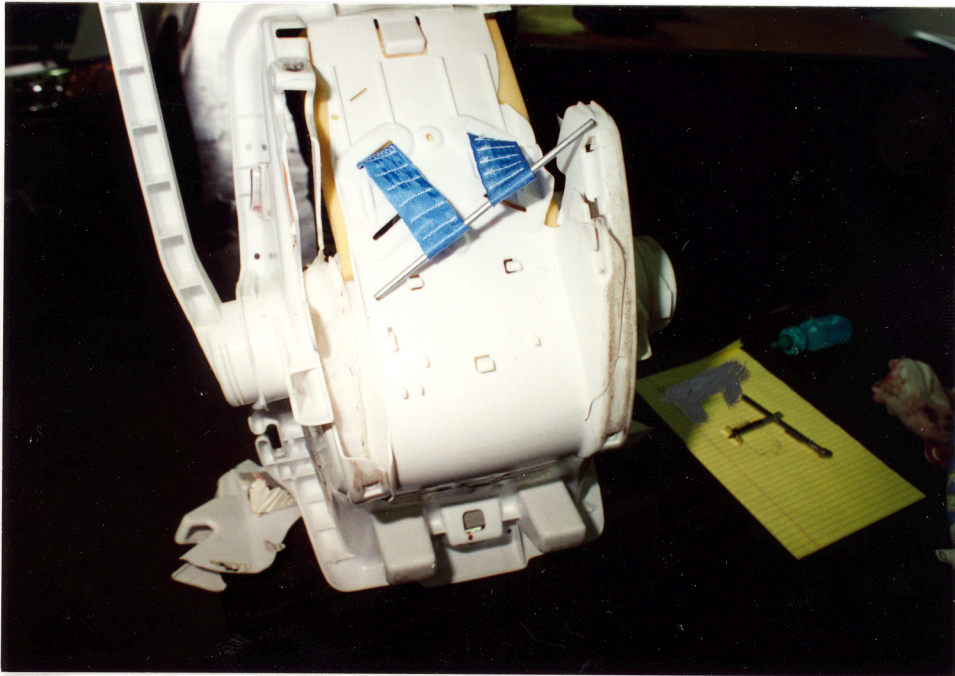
88. Left side view of the Century child restraint.



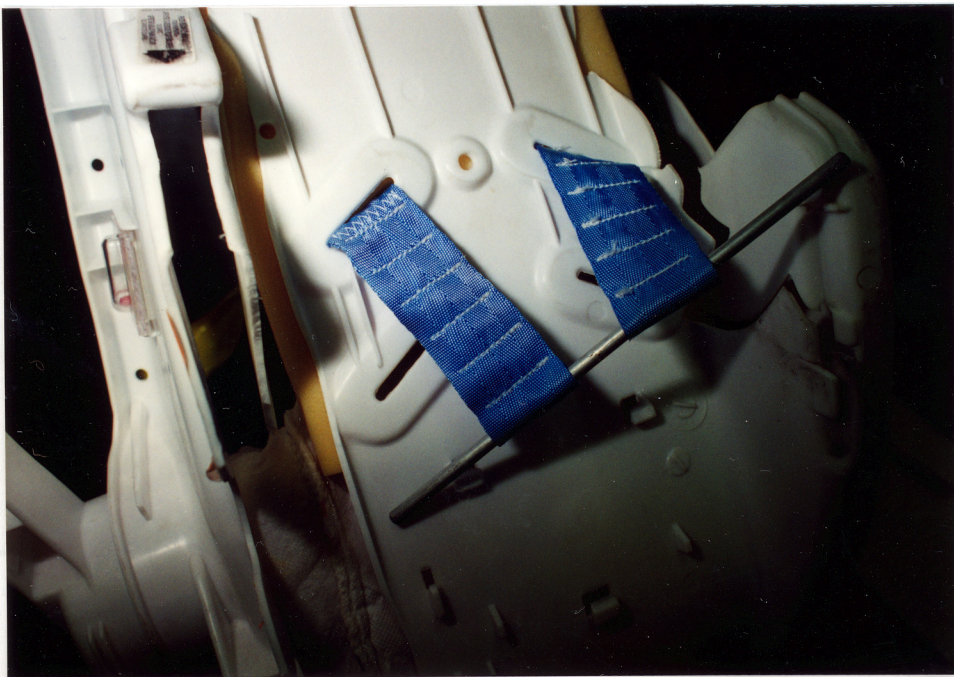
89. Right side view of the Century child restraint.



90. View of the 2.1 cm (0.8'') thick foam padding under the seat covering.



93. Back view of the Century child restraint and fracture points.



94. Shoulder harness adjustment straps positioned through slots for larger infants.



95. Close-up view of the damage to the top of the child restraint.



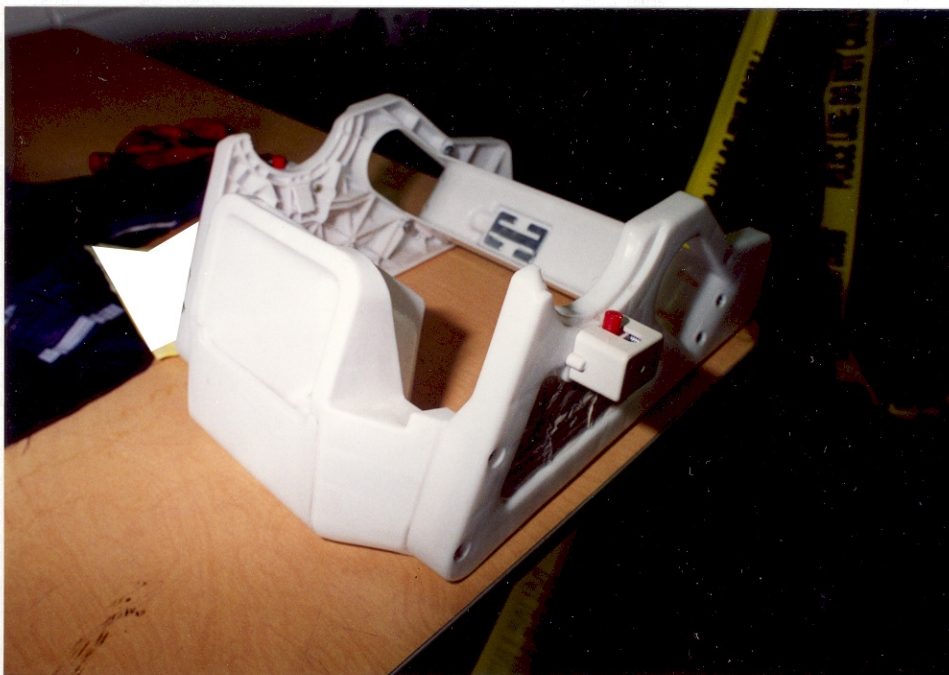
96. Century child restraint travel base (not used).



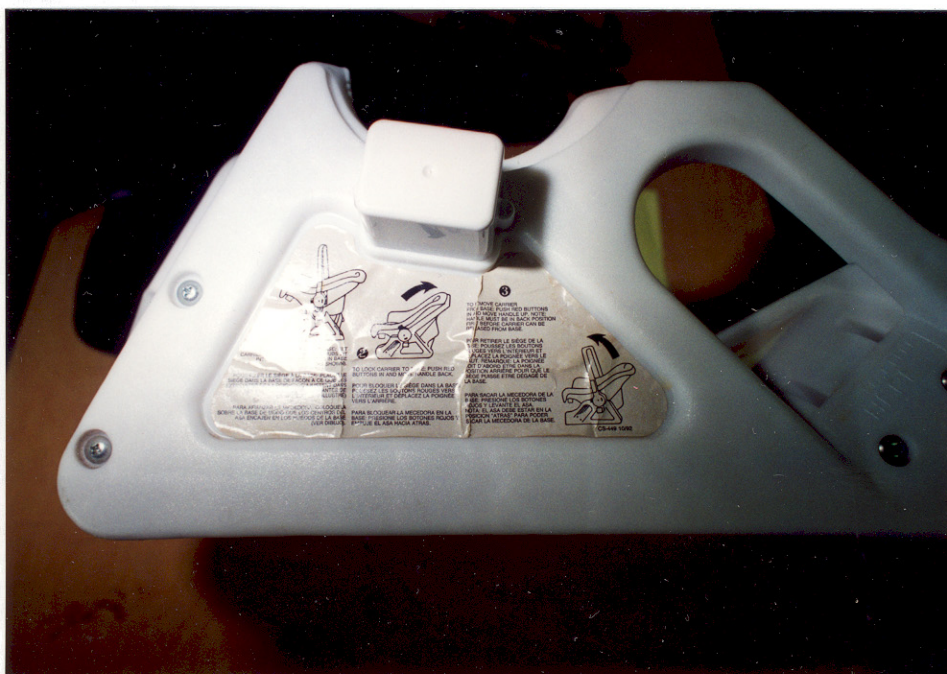
95. Close-up view of the damage to the top of the child restraint.



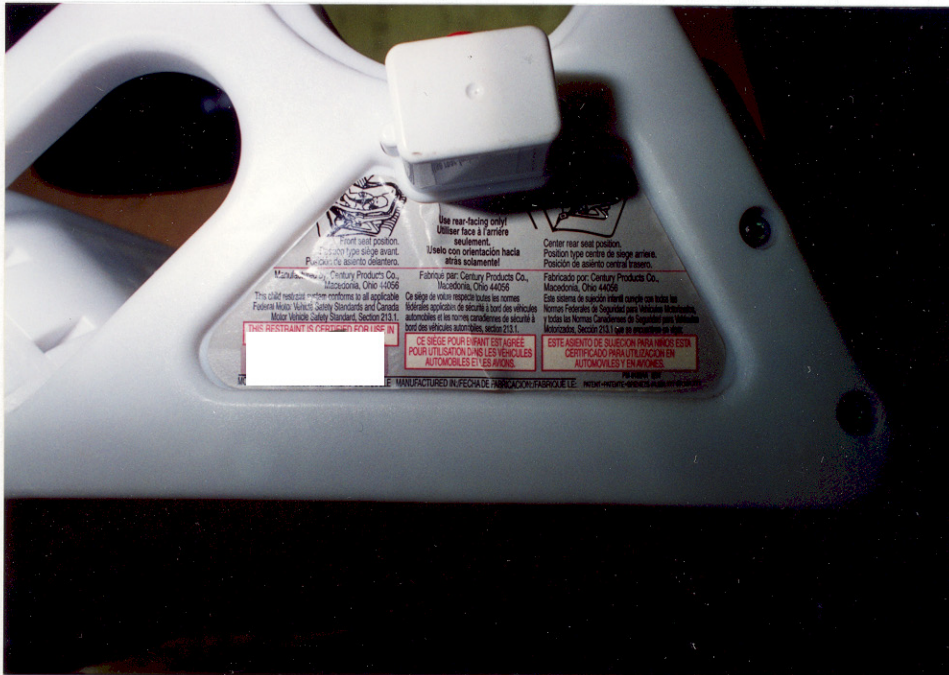
96. Century child restraint travel base (not used).



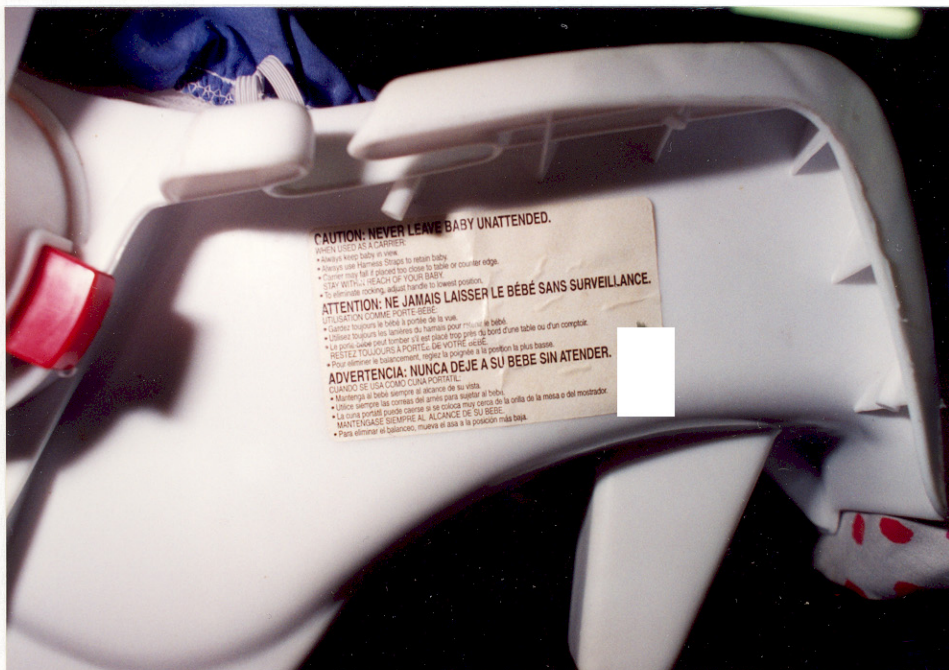
97. Reverse view of the child restraint travel base.



98. Installation and use labeling on left side of travel base.



99. Installation instructions located on right side of travel base for use in a front or rear seat.



100. Caution label on side of child restraint against leaving baby unattended.



101. Left front three-quarter view of the 1966 Chevrolet Impala.



102. Left side view of the Chevrolet Impala.



103. View of the left rear quarter panel and wheel.



104. Rear view of the Chevrolet Impala.



105. Right rear three-quarter view.



106. Longitudinal view showing the depth of crush to the right rear quarter panel of the Chevrolet Impala.



107. View of the impact damage to the Chevrolet Impala.



108. Longitudinal view of the right rear quarter panel.



109. Overhead view showing the extent of crush to the right rear quarter panel.

ATTACHMENT B

**SMASH Output
(Damage Algorithm)**

Summary of Results Using Damage

96-16

Speed Change
(Damage)

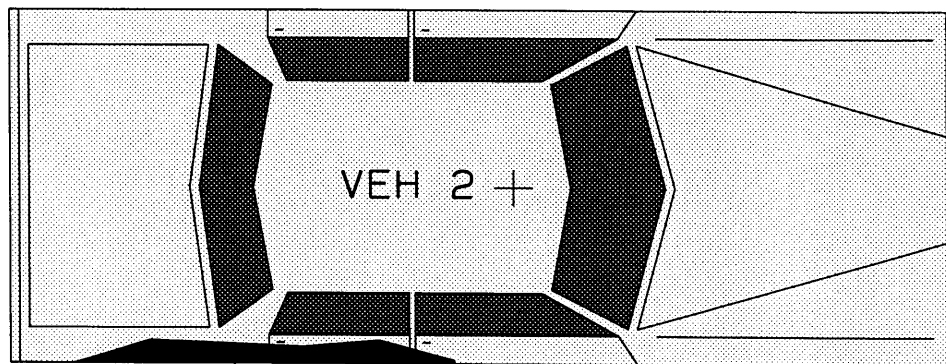
Vehicle #1

Total	19 km/h (12 mph)
Longitudinal	-17 km/h (-11 mph)
Latitudinal	8 km/h (5 mph)
PDOF Angle	-25 ½
Energy Dissipated	= 70699 Joules (52138 Ft-Lb)
Barrier Equivalent Speed	= 26.6 km/h (16.5 mph)
Calculated using crush coefficients entered by the user.	

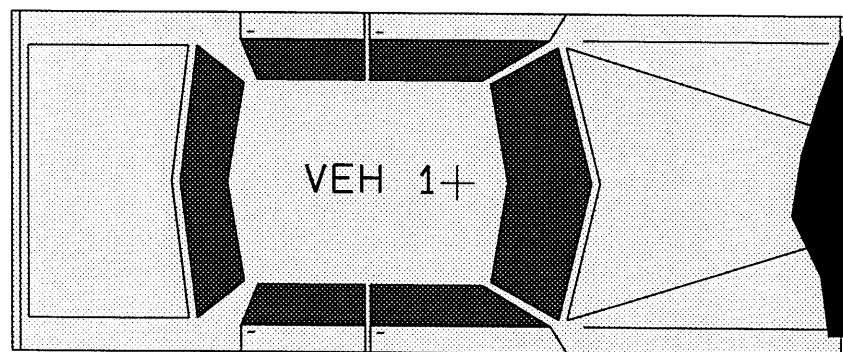
Vehicle #2

Total	18 km/h (11 mph)
Longitudinal	-10 km/h (-6 mph)
Latitudinal	-15 km/h (-9 mph)
PDOF Angle	55 ½
Energy Dissipated	= 19792 Joules (14596 Ft-Lb)
Barrier Equivalent Speed	= 11.1 km/h (6.9 mph)
Calculated using crush coefficients entered by the user.	

1966 Chevrolet Impala



1996 Dodge Caravan



ATTACHMENT C

NASS Vehicle Forms



GENERAL VEHICLE FORM

1. ~~Primary Sampling Unit Number~~

2. Case Number -- ~~Stratum~~ 96-16

3. Vehicle Number 01

VEHICLE IDENTIFICATION

4. Vehicle Model Year 96

Code the last two digits of the model year
(99) Unknown

5. Vehicle Make (specify): Dodge 07

Applicable codes are found in your
NASS Data Collection, Coding and
Editing Manual.
(99) Unknown

6. Vehicle Model (specify): Coravan 442

Applicable codes are found in your
NASS Data Collection, Coding and
Editing Manual.
(999) Unknown

7. Body Type 20

Note: Applicable codes may be found on
the back of this page.

8. Vehicle Identification Number

2BUEP25BUTR [REDACTED]

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17

Left justify; Slash zeros and letter Z (0 and Z)
No VIN—Code all zeros
Unknown—Code all nines

9. Vehicle Special Use (This Trip) 0

- (0) No special use
- (1) Taxi
- (2) Vehicle used as school bus
- (3) Vehicle used as other bus
- (4) Military
- (5) Police
- (6) Ambulance
- (7) Fire truck or car
- (8) Other (specify): _____
- (9) Unknown

OFFICIAL RECORDS

10. Police Reported Vehicle Disposition 1

- (0) Not towed due to vehicle damage
- (1) Towed due to vehicle damage
- (9) Unknown

11. Police Reported Travel Speed 040

Code to the nearest kmph (NOTE: 000 means
less than 0.5 kmph)
(160) 159.5 kmph and above
(999) Unknown

25 mph X 1.6093 = 040 kmph

12. Speed Limit 048

(000) No statutory limit

Code posted or statutory speed limit in kmph
(999) Unknown

30 mph X 1.6093 = 048 kmph

13. Police Reported Alcohol Presence For Driver 1

- (0) No alcohol present
- (1) Yes alcohol present
- (7) Not reported
- (8) No driver present
- (9) Unknown

14. Alcohol Test Result For Driver 20

Code actual value (decimal implied
before first digit—0.xx)

- (95) Test refused
- (96) None given
- (97) AC test performed, results unknown
- (98) No driver present
- (99) Unknown

Source: _____

15. Police Reported Other Drug Presence For Driver 1

- (0) No other drug(s) present
- (1) Yes other drug(s) present
- (7) Not reported
- (8) No driver present
- (9) Unknown

16. Other Drug Specimen Test Result For Driver 2

- (0) No specimen test given
- (1) Drug(s) not found in specimen
- (2) Drug(s) found in specimen, (specify):
0.01 mg COCAINE
- (3) Specimen test given, results unknown or not obtained
- (8) No driver present
- (9) Unknown if specimen test given

17. Driver's Zip Code [REDACTED]

(00001) Driver not a resident of U.S. or territories

Code actual 5-digit zip code
(99998) No driver present
(99999) Unknown

18. Driver's Race/Ethnic Origin 2

- (1) White (non-Hispanic)
- (2) Black (non-Hispanic)
- (3) White (Hispanic)
- (4) Black (Hispanic)
- (5) American Indian, Eskimo or Aleut
- (6) Asian or Pacific Islander
- (7) Other (specify): _____
- (8) No driver present
- (9) Unknown

CODES FOR BODY TYPE

CDS APPLICABLE VEHICLES

Automobiles

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify):

- (09) Unknown automobile type

Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine - more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

Utility Vehicles ($\leq 4,536$ kgs GVWR)

- (14) Compact utility (Jeep CJ-2 - CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

Van Based Light Trucks ($\leq 4,536$ kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van ($\leq 4,536$ kgs GVWR)
- (23) Van based motorhome ($\leq 4,536$ kgs GVWR)
- (24) Van based school bus ($\leq 4,536$ kgs GVWR)
- (25) Van based other bus ($\leq 4,536$ kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify):

- (29) Unknown van type

Light Conventional Trucks (Pickup style cab, $\leq 4,536$ kgs GVWR)

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)
- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

Other Light Trucks ($\leq 4,536$ kgs GVWR)

- (40) Cab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

OTHER VEHICLES

Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify):
- (59) Unknown bus type

Medium/Heavy Trucks ($> 4,536$ kgs GVWR)

- (60) Step van ($> 4,536$ kgs GVWR)
- (61) Single unit straight truck ($4,536$ kgs $<$ GVWR $\leq 8,845$ kgs)
- (62) Single unit straight truck ($8,845$ kgs $<$ GVWR $\leq 11,793$ kgs)
- (63) Single unit straight truck ($> 11,793$ kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify):
- (89) Unknown motored cycle type

Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type

PRECRASH ENVIRONMENTAL DATA**19. Relation To Interchange Or Junction** 2

- (0) Non-interchange area and non-junction
(1) Interchange area related

Non-Interchange junctions

- (2) Intersection related
(3) Driveway, alley access related
(4) Other junction (specify) _____

(5) _____ type of junction

(9) Unknown

20. Trafficway Flow 0

- (0) Not physically divided (two way traffic)
(1) Divided trafficway-median strip without positive barrier
(2) Divided trafficway-median strip with positive barrier
(3) One way traffic
(9) Unknown

21. Number Of Travel Lanes 2

- (1) One
(2) Two
(3) Three
(4) Four
(5) Five
(6) Six
(7) Seven or more
(9) Unknown

22. Roadway Alignment 1

- (1) Straight
(2) Curve right
(3) Curve left
(9) Unknown

23. Roadway Profile 1

- (1) Level
(2) Uphill grade (> 2%)
(3) Hill crest
(4) Downhill grade (> 2%)
(5) Sag
(9) Unknown

24. Roadway Surface Type 2

- (1) Concrete
(2) Bituminous (asphalt)
(3) Brick or block
(4) Slag, gravel, or stone
(5) Dirt
(8) Other (specify): _____
(9) Unknown

25. Roadway Surface Condition 2

- (1) Dry
(2) Wet
(3) Snow or slush
(4) Ice
(5) Sand, dirt, or oil
(8) Other (specify): _____
(9) Unknown

26. Light Conditions 2

- (1) Daylight
(2) ~~Dark~~
(3) ~~Dark, but lighted~~
(4) Dawn
(5) Dusk
(9) Unknown

27. Atmospheric Conditions 1

- (0) No adverse atmospheric-related driving conditions
(1) Rain
(2) Sleet/hail
(3) Snow
(4) Fog
(5) Rain and fog
(6) Sleet and fog
(7) Other (e.g., smog, smoke, blowing sand or dust, etc.) (specify): _____
(9) Unknown

28. Traffic Control Device 2

- (0) No traffic control(s)
(1) Traffic control signal (not RR crossing)

Regulatory

- (2) Stop sign
(3) Yield sign
(4) School zone sign
(5) Other regulatory sign (specify): _____

(6) _____ Warning sign (not RR crossing)

(7) _____ Unknown sign

(8) _____ Miscellaneous/other controls including RR controls (specify): _____

(9) _____ Unknown

29. Traffic Control Device Functioning 2

- (0) No traffic control device
(1) Traffic control device not functioning (specify): _____
(2) _____ Traffic control device functioning properly
(9) Unknown

PRECRAASH DRIVER RELATED DATA**30. Driver's Distraction/Inattention To Driving
(Prior To Recognition Of Critical Event)**

- (00) No driver present
(01) Attentive or not distracted
(02) Looked but did not see

Distractions

(03) By other occupant(s), (specify): _____

(04) By moving object in vehicle (specify): _____

(05) While talking or listening to cellular phone (specify location and type of phone): _____

(06) While dialing cellular phone (specify location and type of phone): _____

(07) While adjusting climate controls

(08) While adjusting radio, cassette, CD (specify): _____

(09) While using other device/controls integral to vehicle (specify): _____

(10) While using or reaching for device/object brought into vehicle (specify): _____

(11) Sleepy or fell asleep

(12) Distracted by outside person, object, or event (specify): _____

(13) Eating or drinking

(14) Smoking related

(97) Distracted/inattentive, details unknown

(98) Other, distraction (specify): _____

(99) Unknown

**31. Pre-Event Movement (Prior to
Recognition of Critical Event)**

- (00) No driver present
(01) Going straight
(02) Decelerating in traffic lane
(03) Accelerating in traffic lane
(04) Starting in traffic lane
(05) Stopped in traffic lane
(06) Passing or overtaking another vehicle
(07) Disabled or parked in travel lane
(08) Leaving a parking position
(09) Entering a parking position
(10) Turning right
(11) Turning left
(12) Making a U-turn
(13) Backing up (other than for parking position)
(14) Negotiating a curve
(15) Changing lanes
(16) Merging
(17) Successful avoidance maneuver to a previous critical event
(97) Other (specify): _____
(99) Unknown

32. Critical Precrash Event**THIS VEHICLE LOSS OF CONTROL DUE TO:**

- (01) Blow out or flat tire
(02) Stalled engine
(03) Disabling vehicle failure (e.g., wheel fell off) (specify): _____
(04) Non-disabling vehicle problem (e.g., hood flew up) (specify): _____
(05) Poor road conditions (puddle, pot hole, ice, etc.) (specify): _____
(06) Traveling too fast for conditions
(08) Other cause of control loss (specify): _____
(09) Unknown cause of control loss

THIS VEHICLE TRAVELLING

- (10) Over the lane line on left side of travel lane
(11) Over the lane line on right side of travel lane
(12) Off the edge of the road on the left side
(13) Off the edge of the road on the right side
(14) End departure
(15) Turning left at intersection
(16) Turning right at intersection
(17) Crossing over (passing through) intersection
(18) This vehicle decelerating
(19) Unknown travel direction

OTHER MOTOR VEHICLE IN LANE

- (50) Other vehicle stopped
(51) Traveling in same direction with lower steady speed
(52) Traveling in same direction while decelerating
(53) Traveling in same direction with higher speed
(54) Traveling in opposite direction
(55) In crossover
(56) Backing
(59) Unknown travel direction of other motor vehicle in lane

OTHER MOTOR VEHICLE ENCROACHING INTO LANE

- (60) From adjacent lane (same direction)—over left lane line
(61) From adjacent lane (same direction)—over right lane line
(62) From opposite direction—over left lane line
(63) From opposite direction—over right lane line
(64) From parking lane
(65) From crossing street, turning into same direction
(66) From crossing street, across path
(67) From crossing street, turning into opposite direction
(68) From crossing street, intended path not known
(70) From driveway, turning into same direction
(71) From driveway, across path
(72) From driveway, turning into opposite direction
(73) From driveway, intended path not known
(74) From entrance to limited access highway
(78) Encroachment by other vehicle—details unknown

PEDESTRIAN, PEDALCYCLIST, OR OTHER NONMOTORIST

- (80) Pedestrian in roadway
(81) Pedestrian approaching roadway
(82) Pedestrian—unknown location
(83) Pedalcyclist or other nonmotorist in roadway (specify): _____
(84) Pedalcyclist or other nonmotorist approaching roadway, (specify): _____
(85) Pedalcyclist or other nonmotorist—unknown location (specify): _____

OBJECT OR ANIMAL

- (87) Animal in roadway
(88) Animal approaching roadway
(89) Animal—unknown location
(90) Object in roadway
(91) Object approaching roadway
(92) Object—unknown location
(98) Other critical precrash event (specify): _____
(99) Unknown

33. Attempted Avoidance Maneuver 99

- (00) No driver present
- (01) No avoidance maneuver
- (02) Braking (no lockup)
- (03) Braking (lockup)
- (04) Braking (lockup unknown)
- (05) Releasing brakes
- (06) Steering left
- (07) Steering right
- (08) Braking and steering left
- (09) Braking and steering right
- (10) Accelerating
- (11) Accelerating and steering left
- (12) Accelerating and steering right
- (98) Other action (specify): _____

(99) Unknown

34. Pre-Impact Stability 1

- (0) No driver present
- (1) Tracking
- (2) Skidding longitudinally—rotation less than 30 degrees
- (3) Skidding laterally—clockwise rotation
- (4) Skidding laterally—counterclockwise rotation
- (7) Other vehicle loss-of-control (specify): _____

(9) Precrash stability unknown

35. Pre-Impact Location 1

- (0) No driver present
- (1) Stayed in original travel lane
- (2) Stayed on roadway but left original travel lane
- (3) Stayed on roadway, not known if left original travel lane
- (4) Departed roadway
- (5) Remained off roadway
- (6) Returned to roadway
- (7) Entered roadway
- (9) Unknown

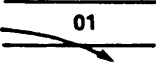
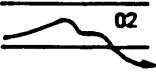
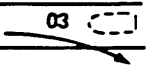
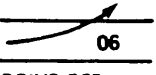
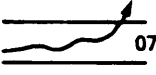
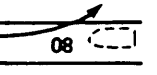
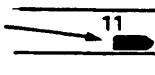
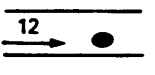

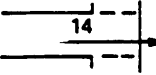
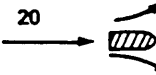

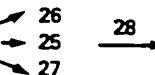
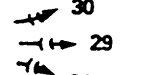
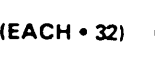
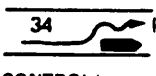
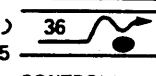
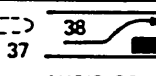
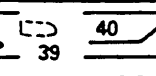
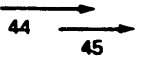
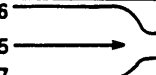

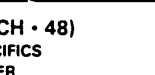



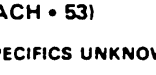


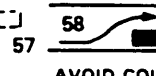
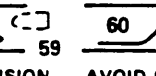

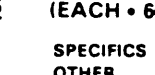

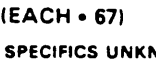

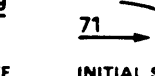


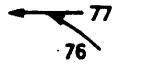
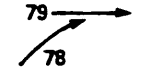

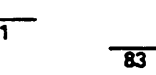
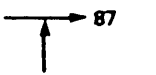
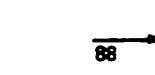


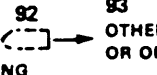



36. Accident Type 86

(Note: Applicable codes on back of this page)

- (00) No impact
Code the number of the diagram that best describes the accident circumstance
- (98) Other accident type (specify): _____

(99) Unknown

STOP HERE IF GV07 DOES NOT EQUAL 01 - 49

Category	Configuration	ACCIDENT TYPES (Includes Intent)				
I. Single Driver	A. Right Roadside Departure	 01 DRIVE OFF ROAD	 02 CONTROL/ TRACTION LOSS	 03 AVOID COLLISION WITH VEH., PED., ANIM.	04 SPECIFICS OTHER	05 SPECIFICS UNKNOWN
	B. Left Roadside Departure	 06 DRIVE OFF ROAD	 07 CONTROL/ TRACTION LOSS	 08 AVOID COLLISION WITH VEH., PED., ANIM.	09 SPECIFICS OTHER	10 SPECIFICS UNKNOWN
	C. Forward Impact	 11 PARKED VEH.	 12 STA. OBJECT	 13 PEDESTRIAN/ ANIMAL	 14 END DEPARTURE	15 SPECIFICS OTHER 16 SPECIFICS UNKNOWN
II. Same Trafficway Same Direction	D. Rear-End	 20 STOPPED 21, 22, 23	 22 SLOWER 25, 26, 27	 24 DECEL. 28, 29, 30, 31	 26 SPECIFICS OTHER	 28 SPECIFICS UNKNOWN
	E. Forward Impact	 34 CONTROL/ TRACTION LOSS	 36 CONTROL/ TRACTION LOSS	 38 AVOID COLLISION WITH VEH.	 40 AVOID COLLISION WITH OBJECT	35 SPECIFICS OTHER 37 SPECIFICS UNKNOWN 39 SPECIFICS OTHER 41 SPECIFICS UNKNOWN
	F. Sideswipe Angle	 44 SPECIFICS OTHER	 46 SPECIFICS OTHER	 48 SPECIFICS OTHER	 49 SPECIFICS OTHER	45 SPECIFICS UNKNOWN 47 SPECIFICS UNKNOWN
III. Same Trafficway Opposite Direction	G. Head-On	 50 LATERAL MOVE	 51 SPECIFICS OTHER	 52 SPECIFICS UNKNOWN	 53 SPECIFICS UNKNOWN	
	H. Forward Impact	 54 CONTROL/ TRACTION LOSS	 56 CONTROL/ TRACTION LOSS	 58 AVOID COLLISION WITH VEH.	 60 AVOID COLLISION WITH OBJECT	55 SPECIFICS OTHER 57 SPECIFICS UNKNOWN 59 SPECIFICS OTHER 61 SPECIFICS UNKNOWN
	I. Sideswipe Angle	 64 LATERAL MOVE	 65 SPECIFICS OTHER	 66 SPECIFICS UNKNOWN	 67 SPECIFICS UNKNOWN	
IV. Change Trafficway Vehicle Turning	J. Turn Across Path	 68 INITIAL OPPOSITE DIRECTIONS	 69 INITIAL SAME DIRECTIONS	 70 SPECIFICS OTHER	 71 SPECIFICS UNKNOWN	
	K. Turn Into Path	 76 TURN INTO SAME DIRECTION	 77 TURN INTO OPPOSITE DIRECTIONS	 78 SPECIFICS OTHER	 79 SPECIFICS UNKNOWN	
V. Intersecting Paths (Vehicle Damage)	L. Straight Paths	 86 SPECIFICS OTHER	 87 SPECIFICS UNKNOWN	 88 SPECIFICS UNKNOWN	 89 SPECIFICS UNKNOWN	
VI. Miscellaneous	M. Backing Etc	 92 BACKING VEH.	 93 OTHER VEH. OR OBJECT	 94 SPECIFICS UNKNOWN	 95 SPECIFICS UNKNOWN	

98 Other Accident Type
99 Unknown Accident Type
00 No Impact

OCCUPANT RELATED

37. Driver Presence in Vehicle 1
 (0) Driver not present
 (1) Driver present
 (9) Unknown
38. Number of Occupants This Vehicle 02
 (00-96) Code actual number of occupants for this vehicle
 (97) 97 or more
 (99) Unknown
39. Number of Occupant Forms Submitted 02

AIR BAG RELATED

40. Is this an AOPS Vehicle? 1
 (0) No (includes unknown)
 (1) Yes - researcher determined
 (2) VIN determined air bag system
 (3) VIN determined automatic (passive) belts
 (4) VIN determined air bag and automatic (passive) belts
41. Air Bag(s) Deployment, First Seat Frontal 6
 (0) Not equipped or not available
 (1) No air bags deployed
Single Air Bag Vehicle
 (2) Driver air bag deployed
 (3) Driver air bag, unknown if deployed
Multiple Air Bag Vehicle
 (4) Driver side only deployed
 (5) Passenger side only deployed
 (6) Driver and passenger side deployed
 (7) Driver and passenger side unknown if deployed
 (8) Air bag(s) deployed, details unknown
 (9) Unknown
42. Air Bag(s) Deployment, Other Than First Seat Frontal 0
 (0) Not equipped with an "other" air bag
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

Specify type of "other" air bag present: _____

VEHICLE WEIGHT ITEMS

43. Vehicle Curb Weight 1.600 0
 Code weight to nearest 10 kilograms.
 (045) Less than 454 kilograms
 (612) 6,124 kilograms or more
 (999) Unknown
~~3.527~~ lbs X .4536 = _____ kgs
 Source: _____

44. Vehicle Cargo Weight 1.600 0
 Code weight to nearest 10 kilograms.
 (000) Less than 5 kilograms
 (454) 4,536 kilograms or more
 (999) Unknown
~~3.527~~ lbs X .4536 = 1.600 kgs
 Source: 3527

ROLLOVER DATA

45. Rollover 00
 (00) No rollover (no overturning)
Rollover (primarily about the longitudinal axis)
 (01-16) Code the number of quarter turns
 (17) Rollover, 17 or more quarter turns (specify): _____
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)
 (99) Rollover (overturn), details unknown
46. Rollover Initiation Type 00
 (00) No rollover
 (01) Trip-over
 (02) Flip-over
 (03) Turn-over
 (04) Climb-over
 (05) Fall-over
 (06) Bounce-over
 (07) Collision with another vehicle
 (08) Other rollover initiation type specify): _____
 (98) Rollover--end-over-end
 (99) Unknown rollover initiation type 0
47. Location of Rollover Initiation 0
 (0) No rollover
 (1) On roadway
 (2) On shoulder--paved
 (3) On shoulder--unpaved
 (4) On roadside or divided trafficway median
 (8) Rollover--end-over-end
 (9) Unknown
48. Rollover Initiation Object Contacted 00
 (Note: Applicable codes on back of page)
49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 0
 (0) No rollover
 (1) Wheels/tires
 (2) Side plane
 (3) End plane
 (4) Undercarriage
 (5) Other location on vehicle (specify): _____
 (6) Non-contact rollover forces (specify): _____
 (8) Rollover--end-over-end
 (9) Unknown
50. Direction of Initial Roll 0
 (0) No rollover
 (1) Roll right - primarily about the longitudinal axis
 (2) Roll left - primarily about the longitudinal axis
 (8) Rollover--end-over-end
 (9) Unknown roll direction

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

- (00) No rollover
- (01-30) — Vehicle Number

Noncollision

- (31) Turn-over — fall-over
- (32) No rollover impact initiation (end-over-end)
- (34) Jackknife

Collision With Fixed Object

- (41) Tree (\leq 10 cm in diameter)
- (42) Tree ($>$ 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment

- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post

- (50) Pole or post (\leq 10 cm in diameter)
- (51) Pole or post ($>$ 10 cm but \leq 30 cm in diameter)
- (52) Pole or post ($>$ 30 cm in diameter)
- (53) Pole or post (diameter unknown)

- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail)
(specify): _____

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify): _____

- (69) Unknown fixed object _____

Collision with Nonfixed Object

- (70) Passenger car, light truck, van, or other vehicle not in-transport
- (71) Medium/heavy truck or bus not in-transport
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (79) Object fell from vehicle in-transport
- (88) Other nonfixed object (specify): _____

- (89) Unknown nonfixed object _____

- (98) Other event (specify): _____

- (99) Unknown event or object _____

OCCUPANT RELATED

37. Driver Presence in Vehicle 1
 (0) Driver not present
 (1) Driver present
 (9) Unknown
38. Number of Occupants This Vehicle 02
 (00-96) Code actual number of occupants for this vehicle
 (97) 97 or more
 (99) Unknown
39. Number of Occupant Forms Submitted 02

AIR BAG RELATED

40. Is this an AOPS Vehicle? 1
 (0) No (includes unknown)
 (1) Yes - researcher determined
 (2) VIN determined air bag system
 (3) VIN determined automatic (passive) belts
 (4) VIN determined air bag and automatic (passive) belts
41. Air Bag(s) Deployment, First Seat Frontal 6
 (0) Not equipped or not available
 (1) No air bags deployed
Single Air Bag Vehicle
 (2) Driver air bag deployed
 (3) Driver air bag, unknown if deployed
Multiple Air Bag Vehicle
 (4) Driver side only deployed
 (5) Passenger side only deployed
 (6) Driver and passenger side deployed
 (7) Driver and passenger side unknown if deployed
 (8) Air bag(s) deployed, details unknown
 (9) Unknown
42. Air Bag(s) Deployment, Other Than First Seat Frontal 0
 (0) Not equipped with an "other" air bag
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

Specify type of "other" air bag present: _____

VEHICLE WEIGHT ITEMS

43. Vehicle Curb Weight 1.600
 _____ Code weight to nearest 10 kilograms.
 (045) Less than 454 kilograms
 (612) 6,124 kilograms or more
 (999) Unknown
3,527 lbs X .4536 = _____ kgs

Source: _____

44. Vehicle Cargo Weight 0.000
 _____ Code weight to nearest 10 kilograms.
 (000) Less than 5 kilograms
 (454) 4,536 kilograms or more
 (999) Unknown
 _____ lbs X .4536 = _____ kgs

Source: _____

ROLLOVER DATA

45. Rollover 00
 (00) No rollover (no overturning)
Rollover (primarily about the longitudinal axis)
 (01-16) Code the number of quarter turns
 (17) Rollover, 17 or more quarter turns (specify): _____
 (98) Rollover--end-over-end (i.e., primarily about the lateral axis)
 (99) Rollover (overturn), details unknown
46. Rollover Initiation Type 00
 (00) No rollover
 (01) Trip-over
 (02) Flip-over
 (03) Turn-over
 (04) Climb-over
 (05) Fall-over
 (06) Bounce-over
 (07) Collision with another vehicle
 (08) Other rollover initiation type specify): _____
 (98) Rollover--end-over-end
 (99) Unknown rollover initiation type
47. Location of Rollover Initiation 0
 (0) No rollover
 (1) On roadway
 (2) On shoulder--paved
 (3) On shoulder--unpaved
 (4) On roadside or divided trafficway median
 (8) Rollover--end-over-end
 (9) Unknown
48. Rollover Initiation Object Contacted 00
 (Note: Applicable codes on back of page)
49. Location on Vehicle Where Initial Principal Tripping Force Is Applied 0
 (0) No rollover
 (1) Wheels/tires
 (2) Side plane
 (3) End plane
 (4) Undercarriage
 (5) Other location on vehicle (specify): _____
 (6) Non-contact rollover forces (specify): _____
 (8) Rollover--end-over-end
 (9) Unknown
50. Direction of Initial Roll 0
 (0) No rollover
 (1) Roll right - primarily about the longitudinal axis
 (2) Roll left - primarily about the longitudinal axis
 (8) Rollover--end-over-end
 (9) Unknown roll direction

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

- (00) No rollover
- (01-30) — Vehicle Number

Noncollision

- (31) Turn-over — fall-over
- (32) No rollover impact initiation (end-over-end)
- (34) Jackknife

Collision With Fixed Object

- (41) Tree (\leq 10 cm in diameter)
- (42) Tree ($>$ 10 cm in diameter)
- (43) Shrubbery or bush
- (44) Embankment

- (45) Breakaway pole or post (any diameter)

Nonbreakaway Pole or Post

- (50) Pole or post (\leq 10 cm in diameter)
- (51) Pole or post ($>$ 10 cm but \leq 30 cm in diameter)
- (52) Pole or post ($>$ 30 cm in diameter)
- (53) Pole or post (diameter unknown)

- (54) Concrete traffic barrier
- (55) Impact attenuator
- (56) Other traffic barrier (includes guardrail)
(specify): _____

- (57) Fence
- (58) Wall
- (59) Building
- (60) Ditch or culvert
- (61) Ground
- (62) Fire hydrant
- (63) Curb
- (64) Bridge
- (68) Other fixed object (specify): _____

- (69) Unknown fixed object

Collision with Nonfixed Object

- (70) Passenger car, light truck, van, or other vehicle not in-transport
- (71) Medium/heavy truck or bus not in-transport
- (76) Animal
- (77) Train
- (78) Trailer, disconnected in transport
- (79) Object fell from vehicle in-transport
- (88) Other nonfixed object (specify): _____

- (89) Unknown nonfixed object

- (98) Other event (specify): _____

- (99) Unknown event or object

VERRIDE/UNDERRIDE (THIS VEHICLE)

51. Front Override/Underride (this Vehicle) 0
52. Rear Override/Underride (this Vehicle) 0
- (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride

*Override (see specific CDC)**[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]*

- (1) 1st CDC
- (2) 2nd CDC
- (3) Other not automated CDC (specify):
- _____

*Underride (see specific CDC)**[Between 2 CDS applicable vehicles (Bodytype, GV07 = 1-49)]*

- (4) 1st CDC
- (5) 2nd CDC
- (6) Other not automated CDC (specify):
- _____

- (7) Medium/heavy truck or bus override (of any configuration)
- (9) Unknown

HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V

Values: (000)-(359) Code actual value

- (996) Non-horizontal impact
- (997) Noncollision
- (998) Impact with object
- (999) Unknown

53. Heading Angle For This Vehicle 2 7 0
54. Heading Angle For Other Vehicle 0 0 0

RECONSTRUCTION DATA

55. Towed Trailing Unit 0
- (0) No towed unit
- (1) Yes—towed trailing unit
- (9) Unknown
56. Documentation of Trajectory Data for This Vehicle 0
- (0) No
- (1) Yes
57. Post Collision Condition of Tree or Pole (For Highest Delta V) 0
- (0) Not collision (for highest delta V) with tree or pole
- (1) Not damaged
- (2) Cracked/sheared
- (3) Tilted <45 degrees
- (4) Tilted ≥45 degrees
- (5) Uprooted tree
- (6) Separated pole from base
- (7) Pole replaced
- (8) Other (specify):
- _____
- (9) Unknown

ACCIDENT RECONSTRUCTION PROGRAMS HIGHEST DELTA V

58. Basis for Total (Resultant) Delta V (highest) 01

(00) No vehicle inspection

Delta V Calculated

- (01) Reconstruction program-damage only routine
- (02) Reconstruction program-damage and trajectory routine
- (03) Missing vehicle algorithm

Delta V Not Calculated

- (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.

All vehicles within scope (CDC applicable) of reconstruction program but one of the collision conditions is beyond the scope of the reconstruction program or other acceptable reconstruction technique, regardless of adequacy of damage data.

- (05) Rollover
- (06) Other non-horizontal forces
- (07) Sideswipe type damage
- (08) Severe override
- (09) Yielding object
- (10) Overlapping damage
- (11) All vehicle and collision conditions are within scope of one of the acceptable reconstruction programs, but there is insufficient data available, (specify):
- _____
- _____

(98) Other, (specify): _____

ESTIMATED DELTA V	INSPECTION TYPE
<p>66. Estimated Highest Delta V (Researcher Determined) <u>0</u></p> <p>(0) Reconstruction Delta V coded</p> <p><i>Estimated Delta V</i></p> <p>(1) Less than 10 kmph</p> <p>(2) ≥ 10 kmph but < 25 kmph</p> <p>(3) ≥ 25 kmph but < 40 kmph</p> <p>(4) ≥ 40 kmph but < 55 kmph</p> <p>(5) ≥ 55 kmph</p> <p><i>Other estimates of damage severity</i></p> <p>(6) Minor</p> <p>(7) Moderate</p> <p>(8) Severe</p> <p>(9) Unknown</p>	<p>67. Type of Vehicle Inspection <u>3</u></p> <p>(0) No inspection</p> <p>(1) Vehicle fully repaired-no damage evident</p> <p>(2) Partial inspection (specify): _____</p> <p>(3) Complete inspection</p> <p>DELTA V EVENT NUMBER</p> <p>68. Delta V Event Number <u>01</u></p> <p>_____ Code the accident event sequence number that resulted in the Delta V that has been coded above for this vehicle</p> <p>(99) Unknown</p>

*** IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67 = 0), ***

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS

*** IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE ***

THE EXTERIOR VEHICLE, INTERIOR VEHICLE,
OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.

EXTERIOR VEHICLE FORM

**NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM**

1. Primary Sampling Unit Number _____ 2. Case Number - Stratum <u>96-16</u>		3. Vehicle Number <u>01</u>
---	--	-----------------------------

VEHICLE IDENTIFICATION

VIN 2B0FP25BUTR [REDACTED] Model Year 96
Vehicle Make (specify): Dodge Vehicle Model (specify): Caravan

LOCATOR

Locate the end of the damage with respect to the vehicle's damaged center point or bumper corner for end impacts or an undamaged axle for side impacts.

Specific Impact No.	Location of Direct Damage	Location of Field L	Location of Max Crush
1	full frontal	full frontal	12.1 cm (R) of centerline

CRUSH PROFILE IN CENTIMETERS

NOTES: Identify the plane at which the C-measurements are taken (e.g., at bumper, above bumper, at sill, above sill, etc.) and label adjustments (e.g., free space).

Measure C1 to C6 from driver to passenger side in front or rear impacts and rear to front in side impacts.

Free space value is defined as the distance between the baseline and the original body contour taken at the individual C locations. This may include the following: bumper lead, bumper taper, side protrusion, side taper, etc. Record the value for each C-measurement and maximum crush.

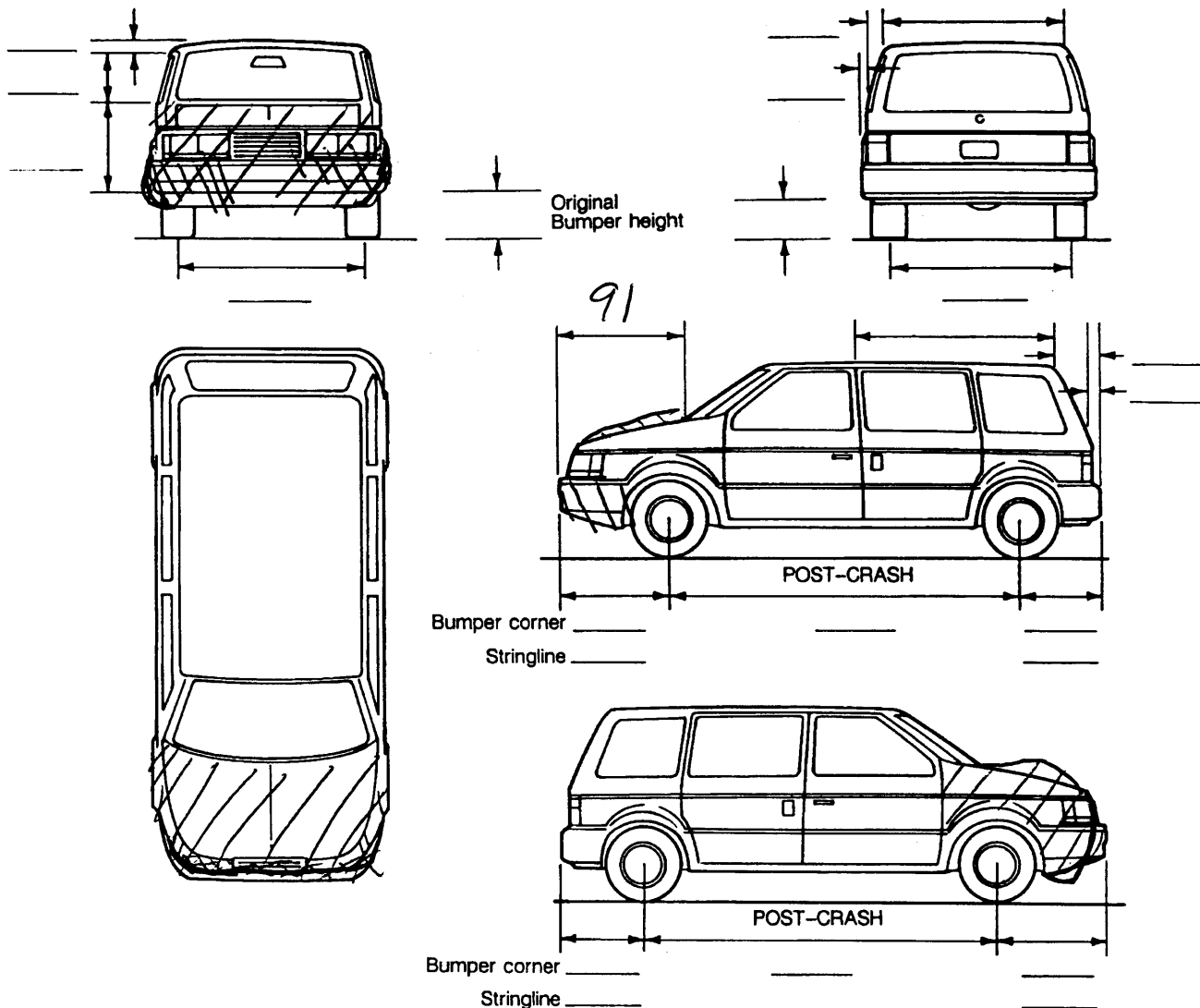
Use as many lines/columns as necessary to describe each damage profile.

[illegible]

VEHICLE DAMAGE SKETCH

TIRE—WHEEL DAMAGE a. Rotation physically restricted RF <u>2</u> LF <u>2</u> RR <u>2</u> LR <u>2</u> (1) Yes (2) No (8) NA (9) Unk.		ORIGINAL SPECIFICATIONS Wheelbase <u>288</u> cm Overall Length <u>473</u> cm Maximum Width <u>192</u> cm Curb Weight <u>1600</u> kg Average Track <u>161.5</u> cm Front Overhang <u>93</u> cm Rear Overhang <u>93</u> cm Undeformed End Width _____ cm Engine Size: cyl./displ. <u>2.4/4</u> L		WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only) RF ± _____ ° LF ± _____ ° RR ± _____ ° LR ± _____ ° Within ± 5 degrees
TYPE OF TRANSMISSION <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Automatic END SHIFT ≥ 10 CM <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		DRIVE WHEELS <input checked="" type="checkbox"/> FWD <input type="checkbox"/> RWD <input type="checkbox"/> 4WD Approximate Cargo Weight <u>0</u> kg		

MEASUREMENTS IN CENTIMETERS



NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

CODES FOR OBJECT CONTACTED

(99) Unknown event or object

[illegible]

COLLISION DEFORMATION CLASSIFICATION

HIGHEST DELTA "V"

Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>01</u>	5. <u>02</u>	6. <u>11</u>	7. <u>F</u>	8. <u>D</u>	9. <u>E</u>	10. <u>W</u>	11. <u>02</u>

Second Highest Delta "V"

12. _____ 13. _____ 14. _____ 15. _____ 16. _____ 17. _____ 18. _____ 19. _____

CRUSH PROFILE IN CENTIMETERS

The crush profile for the damage described in the CDC(s) above should be documented in the appropriate space below. (ALL MEASUREMENTS ARE IN CENTIMETERS.)

HIGHEST DELTA "V"

20. L 21. C₁ C₂ C₃ C₄ C₅ C₆ 22. ± D

130 004.1/016.3/026.9/032.4/016/011.7 + 000

Second Highest Delta "V"

23. L 24. C₁ C₂ C₃ C₄ C₅ C₆ 25. ± D

_____ + _____
_____ - _____

26. Undeformed End Width
(Coded when highest severity impact is an end plane impact.) 130
_____ Code to the nearest centimeter
(250) 250 centimeters or more
(998) No highest severity end plane impact
(999) Unknown

27. Direct Damage Width 130
(For highest severity impact)
_____ Code to the nearest centimeter
(250) 250 centimeters or more
(999) Unknown

28. Original Wheelbase 288
_____ Code to the nearest centimeter
(650) 650 centimeters or more
(999) Unknown
_____ inches X 2.54 = _____ centimeters

29. Original Average Track Width 162
_____ Code to the nearest centimeter
(185) 185 centimeters or more
(999) Unknown
_____ inches X 2.54 = _____ centimeters

FUEL SYSTEM

30. Are CDCs Documented but Not Coded on The Automated File? 0
 (0) No
 (1) Yes
31. Researcher's Assessment of Vehicle Disposition 1
 (0) Not towed due to vehicle damage
 (1) Towed due to vehicle damage
 (9) Unknown
32. Is This A Multi-Stage Manufactured Vehicle And/Or A Certified Altered Vehicle? 0
 (0) No post manufacturer modifications
 (1) Yes - post manufacturer modifications (specify): _____

 (Include photograph of CERTIFICATION PLACARD in case report)
 (9) Unknown if vehicle is modified

FIRE OCCURRENCE

33. Fire Occurrence 0
 (0) No fire
 Yes, fire occurred
 (1) Minor
 (2) Major
 (9) Unknown
34. Origin of Fire 0
 (0) No fire
 (1) Vehicle exterior (front, side, back, top)
 (2) Exhaust system
 (3) Fuel tank (and other fuel retention system parts)
 (4) Engine compartment
 (5) Cargo/trunk compartment
 (6) Instrument panel
 (7) Passenger compartment area
 (8) Other location (specify): _____
 (9) Unknown

35. Location of Fuel Tank-1 Filler Cap 4
36. Location of Fuel Tank-2 Filler Cap 0
 (0) No fuel tank
 (1) On back plane
 (2) Aft of center of the rear wheels (rear axle) on left side plane
 (3) Aft of center of the rear wheels (rear axle) on right side plane
 (4) Forward of center of the rear wheels (rear axle) on left side plane
 (5) Forward of center of the rear wheels (rear axle) on right side plane
 (6) Over the center of the rear wheels (rear axle) on left side plane
 (7) Over the center of the rear wheels (rear axle) on right side plane
 (8) Other (specify): _____
 (9) Unknown
37. Type of Fuel Tank-1 1
38. Type of Fuel Tank-2 0
 (0) No fuel tank (electrical vehicle)
 (1) Metallic
 (2) Non-metallic
 (9) Unknown
39. Location of Fuel Tank-1 1
40. Location of Fuel Tank-2 0
 (0) No fuel tank
 (1) Aft of center of the rear wheels (rear axle) centered
 (2) Aft of center of the rear wheels (rear axle) left side
 (3) Aft of center of the rear wheels (rear axle) right side
 (4) Forward of center of the rear wheels (rear axle) centered
 (5) Forward of center of the rear wheels (rear axle) left side
 (6) Forward of center of the rear wheels (rear axle) right side
 (7) Over center of the rear wheels (rear axle)
 (8) Other (specify): _____
 (9) Unknown
41. Damage to Fuel Tank-1 1
42. Damage to Fuel Tank-2 0
 (0) No fuel tank
 (1) No damage to fuel tank
 (2) Deformed, no seam failure
 (3) Deformed, with a seam failure
 (4) Punctured
 (5) Lacerated (ripped)
 (6) Abraded (scraped)
 (7) Filler neck separation from the fuel tank
 (8) Other damage (specify): _____
 (9) Unknown

43. Leakage Location of Fuel System-1

1

44. Leakage Location of Fuel System-2

0

(0) No fuel tank

(1) No fuel leakage

Primary Area Of Leakage

(2) Tank

(3) Filler neck

(4) Cap

(5) Lines/pump/filter

(6) Vent/emission recovery

(8) Other (specify): _____

(9) Unknown

45. Fuel Type-1

01

46. Fuel Type-2

00*Single Fuel Type*

(00) No fuel tank

(01) Gasoline

(02) Diesel

(03) CNG (Compressed Natural Gas)

(04) LPG (Liquid Petroleum Gas) also known as Propane

(05) LNG (Liquid Natural Gas)

(06) Methanol (M100 or M85)

(07) Ethanol (E100 or E85)

(08) Other (Hydrogen or others) (specify): _____

Electric Powered or Electric/Solar Powered Vehicles

(10) Lead Acid Battery

(11) Nickel-Iron Battery

(12) Nickel-Cadmium Battery

(13) Sodium Metal Chloride Battery

(14) Sodium Sulfur Battery

(18) Other (Specify): _____

(98) Other Hybrid (specify): _____

(99) Unknown fuel type

47. Is This Vehicle Equipped With More Than Two Fuel Tanks?

0

(0) No (one or two tanks only)

Yes - More Than Two Tanks(1) Yes -- no damage to any tank or filler cap and no fuel system leakage(2) Yes -- no damage to any tank or filler cap but there is fuel system leakage (specify leakage location): _____(3) Yes -- damage to an additional tank or filler cap and there is fuel system leakage (specify the following):

Type of tank _____

Tank location _____

Filler cap location _____

Tank damage _____

Location of leakage _____

Type of fuel _____

(9) Unknown if more than two tanks

COMMENTS

*** STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED ***

(GV10=0)

DO NOT COMPLETE THE INTERIOR VEHICLE FORM.



INTERIOR VEHICLE FORM

1. ~~Primary Sampling Unit Number~~

2. Case Number - Stratum

3. Vehicle Number

96-16

01

INTEGRITY

4. Passenger Compartment Integrity

(00) No integrity loss

Yes, Integrity Was Lost Through

- (01) Windshield
- (02) Door (side)
- (03) Door/hatch (back door)
- (04) Roof
- (05) Roof glass
- (06) Side window
- (07) Rear window (backlight)
- (08) Roof and roof glass
- (09) Windshield and door (side)
- (10) Windshield and roof
- (11) Side and rear window (side window and backlight)
- (12) Windshield and side window
- (13) Door and side window
- (98) Other combination of above (specify):

(99) Unknown

Door, Tailgate or Hatch Opening

5. LF / 6. RF / 7. LR / 8. RR / 9. TG/H /

- (0) No door/gate/hatch
- (1) Door/gate/hatch remained closed and operational
- (2) Door/gate/hatch came open during collision
- (3) Door/gate/hatch jammed shut
- (8) Other (specify):

(9) Unknown

Damage/Failure Associated with Door, Tailgate or Hatch Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø

10. LF 0 11. RF 0 12. LR 0 13. RR 0 14. TG/H 0

- (0) No door/gate/hatch or door not opened

Door, Tailgate or Hatch Came Open During Collision

- (1) Door operational (no damage)
- (2) Latch/striker failure due to damage
- (3) Hinge failure due to damage
- (4) Door structure failure due to damage
- (5) Door support (i.e., pillar, sill, roof side rail, etc.) failure due to damage
- (6) Latch/striker and hinge failure due to damage
- (8) Other failure (specify):

(9) Unknown

GLAZING

Type of Window/Windshield Glazing

15. WS 1 16. LF 2 17. RF 2 18. LR 2 19. RR 2
20. BL 2 21. Roof 0 22. Other

- (0) No glazing
- (1) AS-1 — Laminated
- (2) AS-2 — Tempered
- (3) AS-3 — Tempered-tinted (original)
- (4) AS-2 — Tempered-with after market tint
- (5) AS-3 — Tempered-tinted (with additional after market tint)
- (6) AS-14 — Glass/Plastic
- (7) Glazing removed prior to accident
- (8) Other (specify):

(9) Unknown

Window Precrash Glazing Status

23. WS 1 24. LF 2 25. RF 2 26. LR 2 27. RR 2
28. BL 1 29. Roof 0 30. Other 1

- (0) No glazing
- (1) Fixed
- (2) Closed
- (3) Partially opened
- (4) Fully opened
- (7) Glazing removed prior to accident
- (9) Unknown

Glazing Damage from Impact Forces

31. WS / 32. LF / 33. RF / 34. LR / 35. RR /
36. BL / 37. Roof 0 38. Other 1

- (0) No glazing
- (1) No glazing damage from impact forces
- (2) Glazing in place and cracked from impact forces
- (3) Glazing in place and holed from impact forces
- (4) Glazing out-of-place (cracked or not) and not holed from impact forces
- (5) Glazing out-of-place and holed from impact forces
- (6) Glazing disintegrated from impact forces
- (7) Glazing removed prior to accident
- (9) Unknown if damaged

Glazing Damage from Occupant Contact

39. WS / 40. LF / 41. RF / 42. LR / 43. RR /
44. BL / 45. Roof 0 46. Other 1

- (0) No glazing
- (1) No occupant contact to glazing
- (2) Glazing contacted by occupant but no glazing damage
- (3) Glazing in place and cracked by occupant contact
- (4) Glazing in place and holed by occupant contact
- (5) Glazing out-of-place (cracked or not) by occupant contact and not holed by occupant contact
- (6) Glazing out-of-place by occupant contact and holed by occupant contact
- (7) Glazing removed prior to accident
- (8) Glazing disintegrated by occupant contact
- (9) Unknown if contacted by occupant

OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV47-IV86 blank.

INTRUDING COMPONENT

Interior Components

- (01) Steering assembly
- (02) Instrument panel left
- (03) Instrument panel center
- (04) Instrument panel right
- (05) Toe pan
- (06) A (A1/A2)-pillar
- (07) B-pillar
- (08) C-pillar
- (09) D-pillar
- (10) Side panel - forward of the A1/A2-pillar
- (11) Door panel (side)
- (12) Side panel - rear of the B-pillar
- (13) Roof (or convertible top)
- (14) Roof side rail
- (15) Windshield
- (16) Windshield header
- (17) Window frame
- (18) Floor pan (includes sill)
- (19) Backlight header
- (20) Front seat back
- (21) Second seat back
- (22) Third seat back
- (23) Fourth seat back
- (24) Fifth seat back
- (25) Seat cushion
- (26) Back door/panel (e.g., tailgate)
- (27) Other interior component (specify):

NO INTRUSION

Exterior Components

- (30) Hood
- (31) Outside surface of this vehicle (specify):
- (32) Other exterior object in the environment (specify):
- (33) Unknown exterior object
- (97) Catastrophic
- (98) Intrusion of unlisted component(s) (specify):
- (99) Unknown

LOCATION OF INTRUSION

Front Seat

- (11) Left
- (12) Middle
- (13) Right

Fourth Seat

- (41) Left
- (42) Middle
- (43) Right

Second Seat

- (21) Left
- (22) Middle
- (23) Right

- (97) Catastrophic
- (98) Other enclosed area (specify)

(99) Unknown

Third Seat

- (31) Left
- (32) Middle
- (33) Right

MAGNITUDE OF INTRUSION

- (1) ≥ 3 centimeters but < 8 centimeters
- (2) ≥ 8 centimeters but < 15 centimeters
- (3) ≥ 15 centimeters but < 30 centimeters
- (4) ≥ 30 centimeters but < 46 centimeters
- (5) ≥ 46 centimeters but < 61 centimeters
- (6) ≥ 61 centimeters
- (7) Catastrophic
- (9) Unknown

DOMINANT CRUSH DIRECTION

- (1) Vertical
- (2) Longitudinal
- (3) Lateral
- (7) Catastrophic
- (9) Unknown

STEERING COLUMN**INSTRUMENT PANEL**87. Steering Column Type 2

- (1) Fixed column
 (2) Tilt column
 (3) Telescoping column
 (4) Tilt and telescoping column
 (8) Other column type (specify):
 (9) Unknown

88. Tilt Steering Column Adjustment 0

- (0) No tilt steering column
 (1) Full up
 (2) Between full up and center
 (3) Center
 (4) Between center and full down
 (5) Full down
 (9) Unknown

89. Telescoping Steering Column Adjustment 0

- (0) No telescoping steering column
 (1) Full back
 (2) Between full back and midpoint
 (3) Midpoint
 (4) Between midpoint and full forward
 (5) Full forward
 (9) Unknown

90. Steering Rim/Spoke Deformation 00

Code actual measured

deformation to the nearest centimeter

- (00) No steering rim deformation
 (01-14) Actual measured value in centimeters
 (15) 15 centimeters or more
 (98) Observed deformation cannot be measured
 (99) Unknown

91. Location of Steering Rim/Spoke Deformation 00

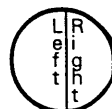
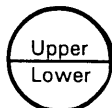
(00) No steering rim deformation

Quarter Sections

- (01) Section A
 (02) Section B
 (03) Section C
 (04) Section D

**Half Sections**

- (05) Upper half of rim/spoke
 (06) Lower half of rim/spoke
 (07) Left half of rim/spoke
 (08) Right half of rim/spoke



- (09) Complete steering wheel collapse
 (10) Undetermined location
 (99) Unknown

92. Odometer Reading 999,000

kilometers

Code to the nearest 1,000 kilometers

- (000) No odometer
 (001) Less than 1,500 kilometers
 (500) 499,500 kilometers or more
 (999) Unknown

_____ miles X 1.6093 = _____ kilometers

Source: unknown93. Instrument Panel Damage from Occupant Contact? 0

- (0) No
 (1) Yes
 (9) Unknown

94. Type of Knee Bolster Covering 1

- (0) No knee bolster
 (1) Padded
 (2) Rigid plastic
 (8) Other (specify):
 (9) Unknown

95. Knee Bolsters Deformed from Occupant Contact? 1

- (0) No knee bolster
 (1) No deformation
 (2) Yes - deformation
 (9) Unknown

96. Did Glove Compartment Door Open During Collision(s)? 1

- (0) No glove compartment door
 (1) No - door did not open
 (2) Yes - door opened
 (9) Unknown

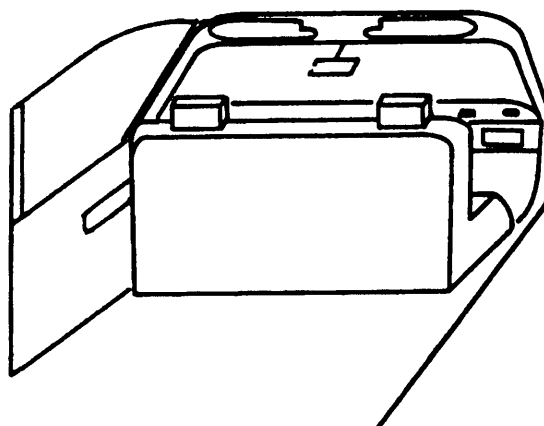
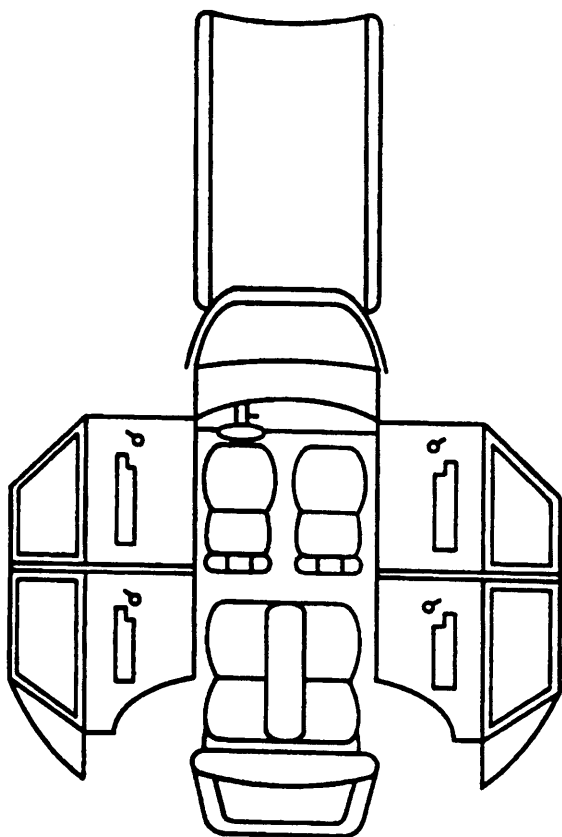
97. Adaptive (Assistive) Driving Equipment 0

- (0) No adaptive driving equipment
 (1) Adaptive driving equipment installed (Check all that apply.)
☐ Hand controls for braking/acceleration
☐ Steering control devices (attached to OEM steering wheel)
☐ Steering knob attached to steering wheel
☐ Low effort power steering (unit or device)
☐ Replacement steering wheel (i.e., reduced diameter)
☐ Joy-stick steering controls
☐ Wheelchair tie-downs
☐ Modification to seat belts (specify):
☐ Additional or relocated switches (specify):
☐ Raised roof
☐ Wall-mounted head rest (used behind wheelchair)
☐ Other adaptive device (specify):

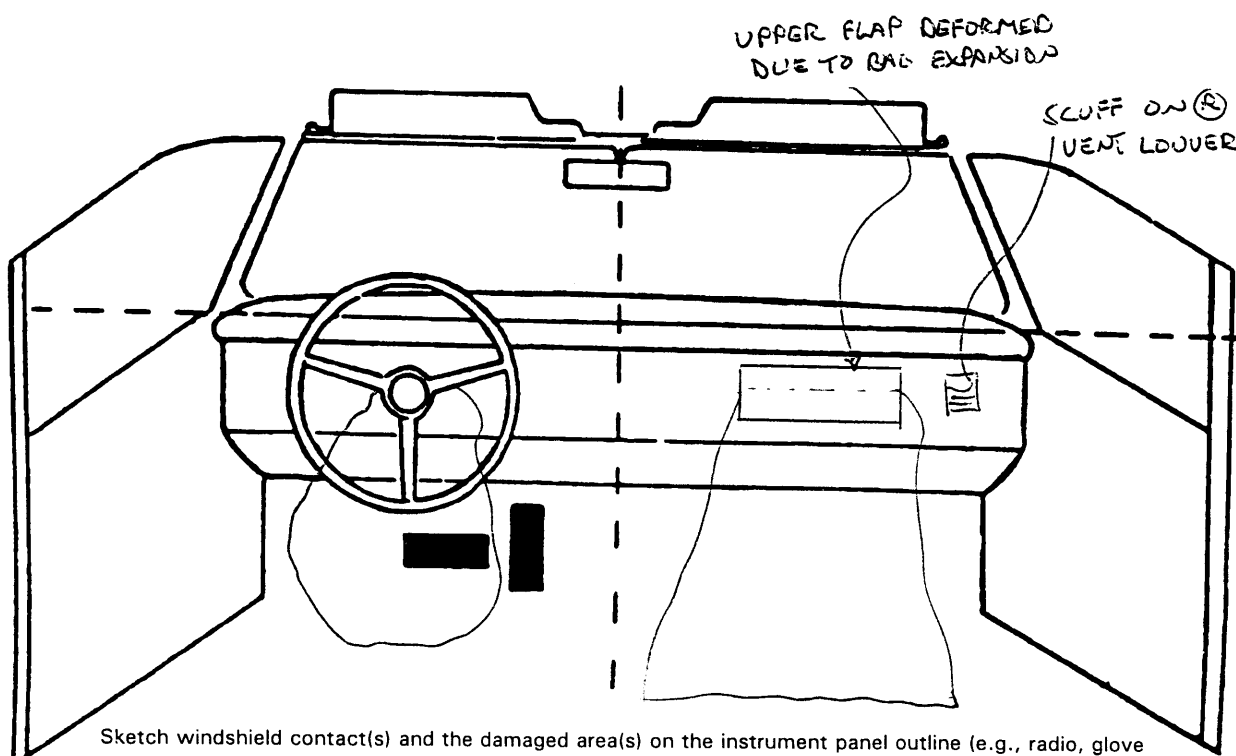
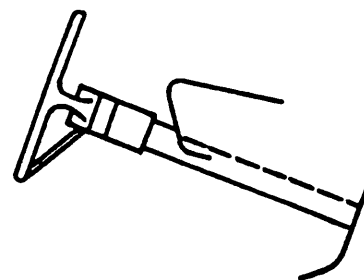
(9) Unknown

VEHICLE INTERIOR SKETCHES

Note area of ejection/entrapment



"NO OCCUPANT CONTACTS"



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure).

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

POINTS OF OCCUPANT CONTACT

Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
A					
B					
C					
D					
E					
F					
G					
H					
I					
J					
K					
L					
M					
N					

FRONT

- (001) Windshield
 (002) Mirror
 (003) Sunvisor
 (004) Steering wheel rim
 (005) Steering wheel hub/spoke
 (006) Steering wheel (combination of codes 004 and 005)
 (007) Steering column, transmission selector lever, other attachment
 (008) Cellular telephone or CB radio
 (009) Add on equipment (e.g., tape deck, air conditioner)
 (010) Left instrument panel and below
 (011) Center instrument panel and below
 (012) Right instrument panel and below
 (013) Glove compartment door
 (014) Knee bolster
 (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
 (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
 (017) Windshield reinforced by exterior object, (specify):
 (019) Other front object (specify):

CODES FOR INTERIOR COMPONENTS

LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
 (052) Left side hardware or armrest
 (053) Left A (A1/A2)-pillar
 (054) Left B-pillar
 (055) Other left pillar (specify):
 (056) Left side window glass
 (057) Left side window frame
 (058) Left side window sill
 (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
 (060) Other left side object (specify):

RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests
 (102) Right side hardware or armrest
 (103) Right A (A1/A2)-pillar
 (104) Right B-pillar
 (105) Other right pillar (specify):
 (106) Right side window glass
 (107) Right side window frame
 (108) Right side window sill
 (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
 (110) Other right side object (specify):

INTERIOR

- (151) Seat, back support
 (152) Belt restraint webbing/buckle
 (153) Belt restraint B-pillar or door frame attachment point
 (154) Other restraint system component (specify):
 (155) Head restraint system
 (160) Other occupants (specify):
 (161) Interior loose objects
 (162) Child safety seat (specify):
 (163) Other interior object (specify):

AIR BAG

- (170) Air bag-driver side
 (175) Air bag compartment cover-driver side
 (180) Air bag-passenger side
 (185) Air bag compartment cover-passenger side
 (190) Other air bag (specify)
 (195) Other air bag compartment cover (specify)

ROOF

- (201) Front header
 (202) Rear header
 (203) Roof left side rail
 (204) Roof right side rail
 (205) Roof or convertible top

FLOOR

- (251) Floor (including toe pan)
 (252) Floor or console mounted transmission lever, including console
 (253) Parking brake handle
 (254) Foot controls including parking brake

REAR

- (301) Backlight (rear window)
 (302) Backlight storage rack, door, etc.
 (303) Other rear object (specify):

ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
 (402) Steering control devices (attached to OEM steering wheel)
 (403) Steering knob attached to steering wheel
 (405) Replacement steering wheel (i.e., reduced diameter)
 (406) Joy stick steering controls
 (407) Wheelchair tie-downs
 (408) Modification to seat belts, (specify):
 (409) Additional or relocated switches, (specify):
 (410) Raised roof
 (411) Wall mounted head rest (used behind wheel chair)
 (412) Other adaptive device (specify):

CONFIDENCE LEVEL OF CONTACT POINT

- (1) Certain
 (2) Probable
 (3) Possible
 (9) Unknown

MANUAL RESTRAINTS

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

If a child safety seat is present, encode the data on the back of this page 11.

If the vehicle has automatic restraints available, encode the appropriate data on page 6.

		Left	Center	Right
FIRST	A-Availability	04		04
	B-Evidence of usage	04		04
	C-Used in this crash?	00		03
	D-Proper Use	0		2
	E-Failure Modes	0		0
	F-Anchorage Adjustment	4		4
SECOND	A-Availability	04		04
	B-Evidence of usage			
	C-Used in this crash?	00		00
	D-Proper Use	0		0
	E-Failure Modes	0		0
	F-Anchorage Adjustment	1		1
OTHER	A-Availability	04	03	04
	B-Evidence of usage			
	C-Used in this crash?	00	00	00
	D-Proper Use	0	0	0
	E-Failure Modes	0	0	0
	F-Anchorage Adjustment	1	1	1

A-Manual (Active) Belt System Availability

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available - type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):

- (9) Unknown

B/C-Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperable (specify):

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used - type unknown
- (08) Other belt used (specify):

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat - type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

D-Proper Use of Manual (Active) Belts

- (0) None used or not available
- (1) Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperly

- (3) Shoulder belt worn under arm
- (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):
- (8) Other improper use of manual belt system (specify):
- (9) Unknown

E-Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other manual belt failure (specify):
- (9) Unknown

F-Shoulder Belt Upper Anchorage Adjustment

- (0) No shoulder belt
- (1) No upper anchorage adjustment for shoulder belt

Adjustable shoulder Belt Upper Anchorage

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Frontal Air Bags--Left Front	Frontal Air Bags-Right Front	Other Air Bag
F I R S T	Availability/Function	/	/	
	Deployment	/	/	
	Failure	/	/	

Air Bag System Availability/Function

- (0) Not equipped/not available
(1) Air bag

Non-functional

- (2) Air bag disconnected (specify): _____
(3) Air bag not reinstalled _____
(9) Unknown

**Air Bag System Deployment
(This Occupant Position)**

- (0) Not equipped/not available
(1) Deployed during accident (as a result of impact)
(2) Deployed inadvertently just prior to accident
(3) Deployed, accident sequence undetermined
(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
(5) Unknown if deployed
(7) Nondeployed
(9) Unknown

Are There Indications of Air Bag**System Failure? (This Occupant Position)**

- (0) Not equipped/not available
(1) No
(2) Yes (specify): _____
(9) Unknown

AUTOMATIC BELTS

		Left	Right
F I R S T	A-Availability/Function		
	B-Use		
	C-Type		
	D-Proper Use		
	E-Failure Modes		

**A-Automatic (Passive) Belt System
Availability/Function**

- (0) Not equipped/not available
(1) 2 point automatic belts
(2) 3 point automatic belts
(3) Automatic belts - type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
(9) Unknown

B-Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
(1) Automatic belt in use
(2) Automatic belt not in use (manually disconnected, motorized track inoperative)
(3) Automatic belt use unknown
(9) Unknown

C-Automatic (Passive) Belt System Type

- (0) Not equipped/not available
(1) Non-motorized system
(2) Motorized system
(9) Unknown

**D-Proper Use of Automatic (Passive) Belt
System**

- (0) Not equipped/not available/not used
(1) Automatic belt used properly
(2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
(4) Automatic shoulder belt worn behind back
(5) Automatic belt worn around more than one person
(6) Lap portion of automatic belt worn on abdomen
(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): _____

- (8) Other improper use of automatic belt system (specify): _____
(9) Unknown

**E-Automatic (Passive) Belt Failure Modes
During Accident**

- (0) Not equipped/not available/not in use
(1) No automatic belt failure(s)
(2) Torn webbing (stretched webbing not included)
(3) Broken buckle or latchplate
(4) Upper anchorage separated
(5) Other anchorage separated (specify): _____
(6) Broken retractor
(7) Combination of above (specify): _____
(8) Other automatic belt failure (specify): _____
(9) Unknown

FIRST SEAT FRONTAL AIR BAGS

NOTES: Encode the applicable data *for the driver and first seat passenger* in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

	Driver	Passenger
A-Type of air bag?	1	1
B-Flaps open at tear points?	2	2
C-Flaps damaged?	1	1
D-Air bag damaged?	01	04
E-Source of air bag damage	01	06
F-Air bag tethered?	2	1
G-Air bag have vent ports?	1	1
H-Other occupant contact air bag?	1	1
I-Occupant wearing eyewear?	9	1

A-Type of Air Bag

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

B-Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

C-Were Air Bag Module Cover Flap(s) Damaged?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

D-Was There Damage To The Air Bag?

- (00) Not equipped/not available
- (01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify):

- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

E-Source of Air Bag Damage

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify):
- (03) Object carried by occupant, (specify):
- (04) Adaptive/assistive controls, (specify):
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify):
- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

F-Was The Air Bag Tethered?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps): 2
- (3) Deployed, unknown if tethered
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

G-Did The Air Bag Have Vent Ports?

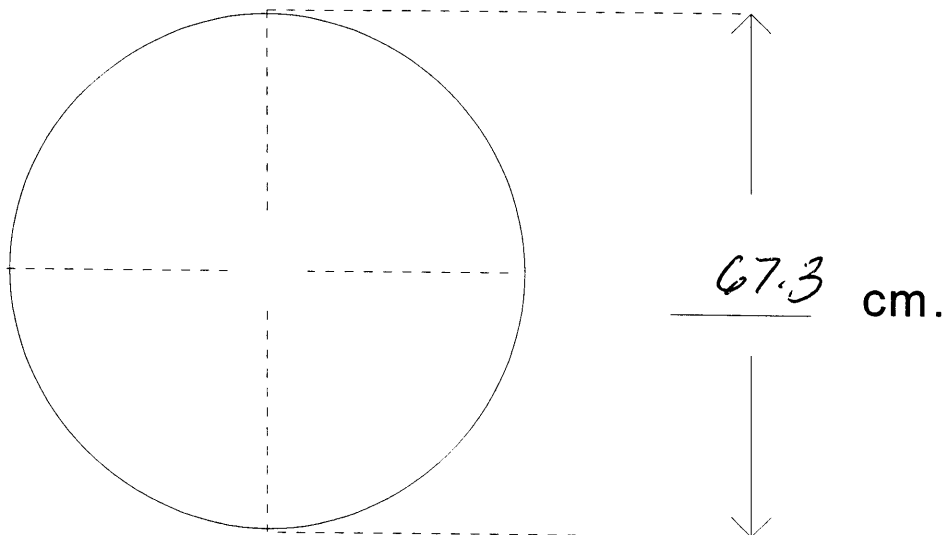
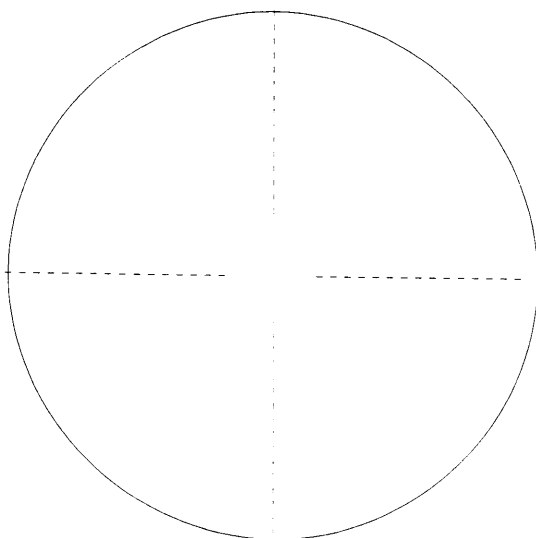
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports):
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

H-Was the Air Bag in this Occupant's Position Contacted by Another Occupant?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

I-Was This Occupant Wearing Eye-wear?

- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

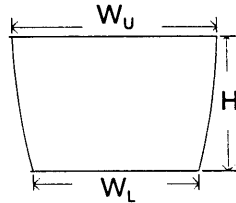
DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES**1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front)****2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)**

DRIVER AIR BAG SKETCHES (Cont'd)

3. DRIVER AIR BAG MODULE COVER FLAP SIZE (SINGLE)

width (W_U) _____ width (W_L) _____

height (H) _____



4. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)

a. Upper Flap

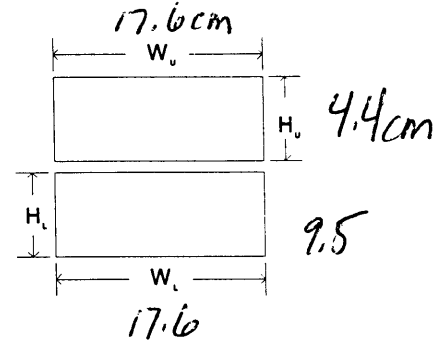
b. Lower Flap

width (W_U) 17.6

width (W_L) 17.6

height (H_U) 4.4

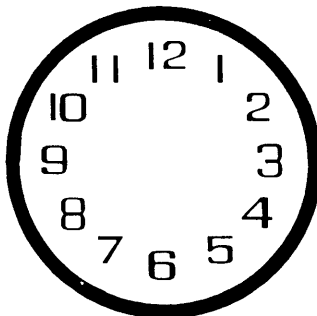
height (H_L) 9.5



5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE

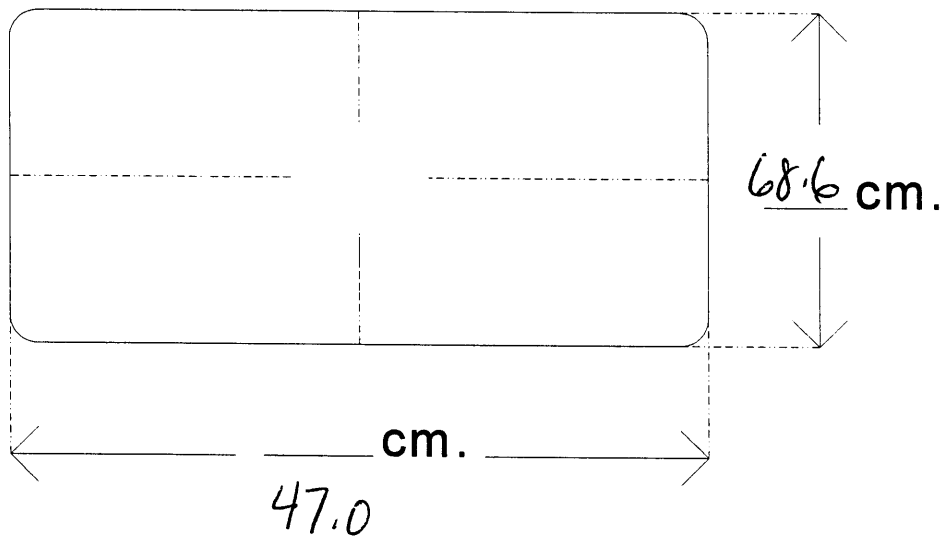
6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS

7. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS

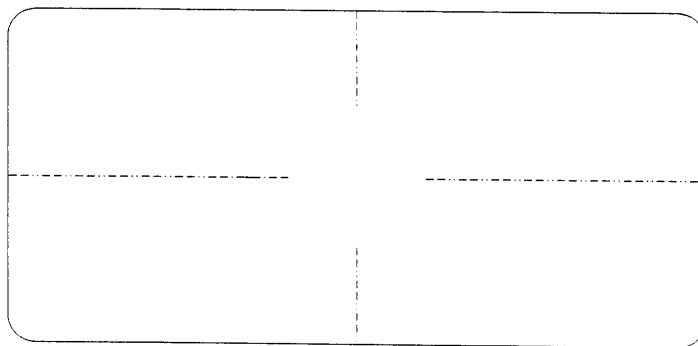


PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Front)



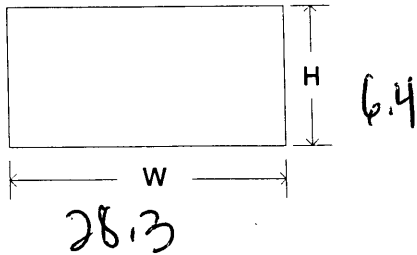
2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



PASSENGER AIR BAG SKETCHES (Cont'd)

3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE)

width (W) 28.3 cm
height (H) 6.4 cm



4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE)

a. Upper Flap

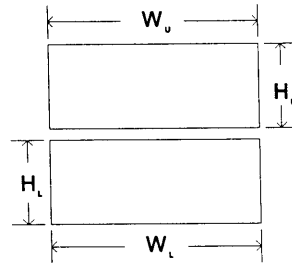
b. Lower Flap

width (W_U) _____

width (W_L) _____

height (H_U) _____

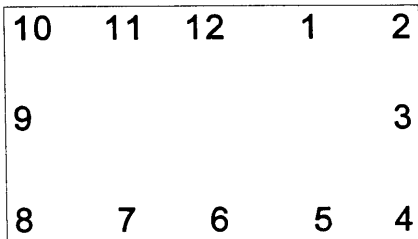
height (H_L) _____



5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE

6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS

7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS



"OTHER" AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Front)

2. SKETCH DAMAGE AND CONTACT EVIDENCE ON "OTHER" AIR BAG (Back)

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found on the next page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
FIRST	A-Head Restraint Type/Damage	1	/	1
	B-Seat Type	09		09
	C-Seat Orientation	1		1
	D-Seat Track Position	4		2
	E-Seat Back Incline Pre/Post Impact	23		23
	F-Seat Performance	1		1
SECOND	A-Head Restraint Type/Damage	0	/	0
	B-Seat Type	03		03
	C-Seat Orientation	1		1
	D-Seat Track Position	1		1
	E-Seat Back Incline Pre/Post Impact	01		01
	F-Seat Performance	1		1
THIRD	A-Head Restraint Type/Damage	0	0	0
	B-Seat Type	05	05	05
	C-Seat Orientation	1	1	1
	D-Seat Track Position	1	1	1
	E-Seat Back Incline Pre/Post Impact	01	01	01
	F-Seat Performance	1	1	1
OTHER	A-Head Restraint Type/Damage			
	B-Seat Type			
	C-Seat Orientation			
	D-Seat Track Position			
	E-Seat Back Incline Pre/Post Impact			
	F-Seat Performance			

**DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE
(I.E., UNUSUAL OCCUPANT CONTACT PATTERN)**

HEAD RESTRAINTS/SEAT EVALUATION

A-Head Restraint Type/Damage by Occupant at This Occupant Position

- (0) No head restraints
- (1) Integral — no damage
- (2) Integral — damaged during accident
- (3) Adjustable — no damage
- (4) Adjustable — damaged during accident
- (5) Add-on — no damage
- (6) Add-on — damaged during accident
- (8) Other (specify): _____
- (9) Unknown

B-Seat Type (this Occupant Position)

- (00) Occupant not seated or no seat
- (01) Bucket
- (02) Bucket with folding back
- (03) Bench
- (04) Bench with separate back cushions
- (05) Bench with folding back(s)
- (06) Split bench with separate back cushions
- (07) Split bench with folding back(s)
- (08) Pedestal (i.e., column supported)
- (09) Box mounted seat (i.e., van type)
- (10) Other seat type (specify): _____
- (99) Unknown

C-Seat Orientation (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) Forward facing seat
- (2) Rear facing seat
- (3) Side facing seat (inward)
- (4) Side facing seat (outward)
- (8) Other (specify): _____
- (9) Unknown

D-Seat Track Adjusted Position Prior To Impact

- (0) Occupant not seated or no seat
- (1) Non-adjustable seat track

Adjustable Seat Track

- (2) Seat at forward most track position
- (3) Seat between forward most and middle track positions
- (4) Seat at middle track position
- (5) Seat between middle and rear most track positions
- (6) Seat at rear most track position
- (9) Unknown

E-Seat Back Incline Prior and Post Impact

- (00) Occupant not seated or no seat
- (01) Not adjustable

Upright prior to impact

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

Slightly reclined prior to impact

- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

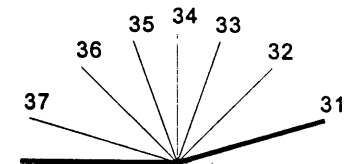
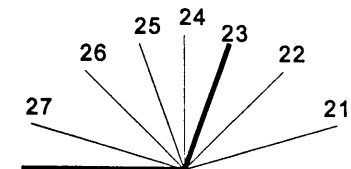
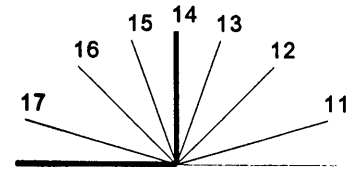
Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position

- (99) Unknown

F-Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify): _____
- (4) Seat tracks/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion (specify): _____
- (7) Combination of above (specify): _____
- (8) Other (specify): _____
- (9) Unknown

Coding diagrams for *Seat Back Incline Position Prior and Post Impact*

DESCRIBE ANY INDICATION OF
ABNORMAL OCCUPANT POSTURE
(I.E., UNUSUAL OCCUPANT
CONTACT PATTERN)

CHILD SAFETY SEAT FIELD ASSESSMENT

When a child safety seat is present enter the occupant's number in the first row and complete the column below the occupant's number using the codes listed below. Complete a column for each child safety seat present.

Occupant Number	02					
1. Type of Child Safety Seat	1					
2. Child Safety Seat Orientation	01					
3. Child Safety Seat Harness Usage	12					
4. Child Safety Seat Shield Usage	03					
5. Child Safety Seat Tether Usage	03					
6. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat					

1. Type of Child Safety Seat

- (0) No child safety seat
- (1) Infant seat
- (2) Toddler seat
- (3) Convertible seat
- (4) Booster seat
- (7) Other type child safety seat (specify):

- (8) Unknown child safety seat type
- (9) Unknown if child safety seat used

2. Child Safety Seat Orientation

- (00) No child safety seat
- Designed for Rear Facing for This Age/Weight
- (01) Rear facing
- (02) Forward facing
- (08) Other orientation (specify):

- (09) Unknown orientation
- Designed for Forward Facing for This Age/Weight
- (11) Rear facing
- (12) Forward facing
- (18) Other orientation (specify):

- (19) Unknown orientation
- Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight
- (21) Rear facing
- (22) Forward facing
- (28) Other orientation (specify):

- (29) Unknown orientation
- (99) Unknown if child safety seat used

3. Child Safety Seat Harness Usage

4. Child Safety Seat Shield Usage

5. Child Safety Seat Tether Usage

Note: Options Below Are Used for Variables 3-5.
(00) No child safety seat

Not Designed with Harness/Shield/Tether

- (01) After market harness/shield/tether added, not used
- (02) After market harness/shield/tether used
- (03) Child safety seat used, but no after market harness/shield/tether added
- (09) Unknown if harness/shield/tether added or used

Designed With Harness/Shield/Tether

- (11) Harness/shield/tether not used
- (12) Harness/shield/tether used
- (19) Unknown if harness/shield/tether used

Unknown If Designed With Harness/Shield/Tether

- (21) Harness/shield/tether not used
- (22) Harness/shield/tether used
- (29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

6. Child Safety Seat Make/Model
(Specify make/model and occupant number)

Pentury

EJECTION/ENTRAPMENT DATA

Complete the following if the researcher has any indication that an occupant was either ejected from or entrapped in the vehicle. Code the appropriate data on the Occupant Assessment Form.

EJECTION No ☒ Yes []

Describe indications of ejection and body parts involved in partial ejection(s):

Occupant Number						
Ejection						
(Note on Vehicle Interior Sketch) Ejection Area						
Ejection Medium						
Medium Status						

Ejection

- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, Unknown degree
- (9) Unknown

Ejection Area

- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear

(7) Roof

(8) Other area (e.g., back of pickup, etc.) (specify):

(9) Unknown

Ejection Medium

- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify):

(5) Integral structure

(8) Other medium (specify):

(9) Unknown

Medium Status (Immediately Prior to Impact)

- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

ENTRAPMENT No ☒ Yes []

Describe entrapment mechanism:

Component(s):

(Note on vehicle interior sketch)

ATTACHMENT D

NASS Occupant Forms



OCCUPANT ASSESSMENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. ~~Primary Sampling Unit Number~~

2. Case Number - Stratum

3. Vehicle Number

4. Occupant Number

OCCUPANT'S CHARACTERISTICS

5. Occupant's Age

Code actual age at time of accident.

(00) Less than one year old (specify by month):

(97) 97 years and older

(99) Unknown

6. Occupant's Sex

(1) Male

(2) Female-not reported pregnant

(3) Female-pregnant-1st trimester(1st-3rd month)

(4) Female-pregnant-2nd trimester(4th-6th month)

(5) Female-pregnant-3rd trimester(7th-9th month)

(6) Female-pregnant-term unknown

(9) Unknown

7. Occupant's Height

Code actual height to the nearest
centimeter.

(999) Unknown

66 inches X 2.54 = 167.6 centimeters

8. Occupant's Weight

Code actual weight to the nearest
kilogram.

(999) Unknown

140 pounds X .4536 = 63.5 kilograms

9. Occupant's Role

(1) Driver

(2) Passenger

(9) Unknown

OCCUPANT'S SEATING

10. Occupant's Seat Position

Front Seat

(11) Left side

(12) Middle

(13) Right side

(14) Other (specify):

(15) On or in the lap of another occupant

Second Seat

(21) Left side

(22) Middle

(23) Right side

(24) Other (specify):

(25) On or in the lap of another occupant

Third Seat

(31) Left side

(32) Middle

(33) Right side

(34) Other (specify):

(35) On or in the lap of another occupant

Fourth Seat

(41) Left side

(42) Middle

(43) Right side

(44) Other (specify):

(45) On or in the lap of another occupant

(97) In or on unenclosed area

(98) Other seat (specify):

(99) Unknown

11. Occupant's Posture

(0) Normal posture

Abnormal posture

(1) Kneeling or standing on seat

(2) Lying on or across seat

(3) Kneeling, standing or sitting in front of seat

(4) Sitting sideways or turned to talk with
another occupant or to look out a rear
window

(5) Sitting on a console

(6) Lying back in a reclined seat position

(7) Bracing with feet or hands on a surface in
front of seat

(8) Other abnormal posture (specify):

(9) Unknown

EJECTION/ENTRAPMENT

12. Ejection

- (0) No ejection
- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

0

13. Ejection Area

- (0) No ejection
- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear
- (7) Roof
- (8) Other area (e.g., back of pickup, etc.)
(specify): _____
- (9) Unknown

0

14. Ejection Medium

- (0) No ejection
- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify): _____
- (5) Integral structure
- (8) Other medium (specify): _____
- (9) Unknown

0

15. Medium Status (Immediately Prior To Impact)

- (0) No ejection
- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

0

16. Entrapment

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, etc.
(specify): _____
- (9) Unknown

0

17. Occupant Mobility

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or not oriented to time or place
- (2) Removed from vehicle due to perceived serious injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (8) Removed from vehicle for other reasons
(specify): _____
- (9) Unknown

4

BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available—type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify):

(9) Unknown

19. Manual (Active) Belt System Use

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperative (specify):

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used—type unknown
- (08) Other belt used (specify):

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat—type unknown
- (18) Other belt used with child safety seat (specify):
- (99) Unknown if belt used

20. Proper Use of Manual (Active) Belts

- (0) None used or not available
- (1) Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperly

- (3) Shoulder belt worn under arm
- (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify):

(8) Other improper use of manual belt system (specify):

(9) Unknown

21. Manual (Active) Belt Failure Modes During Accident

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):

- (6) Broken retractor
- (7) Combination of above (specify):

(8) Other manual belt failure (specify):

(9) Unknown

22. Manual Shoulder Belt Upper Anchorage Adjustment

- (0) No manual shoulder belt
- (1) No upper anchorage adjustment for manual shoulder belt

Adjustable shoulder Belt Upper Anchorage

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

24. Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):
- (3) Automatic belt use unknown
- (9) Unknown

25. Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

26. Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or

automatic shoulder belt used improperly with child safety seat (specify):

- (8) Other improper use of automatic belt system (specify):
- (9) Unknown

27. Automatic (Passive) Belt Failure Modes During Accident

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):

- (6) Broken retractor
- (7) Combination of above (specify):
- (8) Other automatic belt failure (specify):

(9) Unknown

POLICE REPORTED RESTRAINT USE

AIR BAG SYSTEM FUNCTION

28. Police Reported Belt Use 4

- (0) None used
 (1) Police did not indicate belt use
 (2) Shoulder belt
 (3) Lap belt
 (4) Lap and shoulder belt
 (5) Belt used, type not specified
 (6) Child safety seat
 (7) Automatic belt
 (8) Other type belt, (specify):

(9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 2

- (0) No air bag available
 (1) Police did not indicate air bag availability/function
 (2) Deployed
 (3) Not deployed
 (4) Unknown if deployed
 (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- ☒ Vehicle inspection
☐ Official injury data
☐ Driver/occupant interview
☐ Other (specify):

☐ Unknown if belt used

30. Frontal Air Bag System 1

Availability/Function
 (This Occupant Position)

- (0) Not equipped/not available
 (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):

- (3) Air bag not reinstalled
 (9) Unknown

31. Frontal Air Bag System Deployment 1

(This Occupant Position)

- (0) Not equipped/not available
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

32. Other Than First Seat Frontal Air Bag 0

Availability/Function

- (This Occupant Position)
 (0) Not equipped/not available
 (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):

- (3) Air bag not reinstalled
 (9) Unknown

Specify type of "other" air bag present:

33. Air Bag(s) Deployment, Other Than First 0

Seat Frontal (This Occupant Position)

- (0) Not equipped with an "other" air bag
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

34. Are There Indications of Air Bag System 1

Failure?
 (This Occupant Position)

- (0) Not equipped/not available
 (1) No
 (2) Yes (specify):

(9) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

35. Had Vehicle Been in Previous Accident(s)? 1

- (0) Not equipped/not available
(1) No previous accidents

Yes

- (2) Previous accident(s) without deployment(s)
(3) One previous accident with deployment
(4) More than one previous accident with at least one deployment
(8) Previous accidents, unknown deployment status
(9) Unknown

36. Type of Air Bag 1

- (0) Not equipped/not available
(1) Original manufacturer installed system
(2) Retrofitted air bag
(3) Replacement air bag
(8) Unknown type of air bag
(9) Unknown

37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 1

- (0) Not equipped/not available
(1) No prior maintenance
(2) Yes, prior maintenance (specify):

(9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 01

- (00) Not equipped/not available

Code the accident event sequence number that initiated the air bag deployment
(96) Deployed, unknown event
(97) Not deployed
(98) Unknown if deployed
(99) Unknown

39. CDC For Air Bag Deployment Impact 1

- (0) Not equipped/not available
(1) Highest delta V
(2) Second highest delta V
(3) Other non-coded delta V (specify):

(6) Deployed, unknown event
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

40. Longitudinal Component of Delta V For Air Bag Deployment Impact 017

- (_000) Not equipped/not available
Code the value of the delta V for the impact that initiated the air bag deployment
(_996) Deployment, unknown longitudinal Delta V
(_997) Not deployed
(_998) Unknown if deployed
(_999) Unknown

41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 2

- (0) Not equipped/not available
(1) No
(2) Yes
(3) Deployed, unknown if flap(s) opened at designated tear points
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

42. Were Air Bag Module Cover Flap(s) Damaged? 1

- (0) Not equipped/not available
(1) No
(2) Yes (specify): _____
(3) Deployed, unknown if air bag module cover flap(s) damaged
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

43. Was There Damage To The Air Bag? 01

- (00) Not equipped/not available
(01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
(03) Cut
(04) Torn
(05) Holed
(06) Burned
(07) Abraded
(88) Other damage (specify):

- (95) Damaged, details unknown
(96) Deployed, unknown if damaged
(97) Not deployed
(98) Unknown if deployed
(99) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM
EVALUATION** *continued*
HEAD RESTRAINT AND SEAT EVALUATION

44. Source of Air Bag Damage 01
 (00) Not equipped/not available
 (01) Not damaged
 (02) Object worn by occupant, (specify):
 (03) Object carried by occupant, (specify):
 (04) Adaptive/assistive controls, (specify):
 (05) Fire in vehicle
 (06) Thermal burns
 (07) Rescue or emergency efforts
 (08) Other damage source (specify):
 (95) Damaged, unknown source
 (96) Deployed, unknown if damaged
 (97) Not deployed
 (98) Unknown if deployed
 (99) Unknown
45. Was The Air Bag Tethered? 2
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify number of tether straps): 2
 (3) Deployed, unknown if tethered
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 0
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify number of vent ports):
 (3) Deployed, unknown if vent ports present
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify):
 (3) Deployed, unknown if other occupant contact to air bag
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 9
 (0) Not air bag equipped/air bag not available
 (1) No
 (2) Eyeglasses/sunglasses
 (3) Contact lenses
 (4) Deployed, unknown if eyewear worn
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown

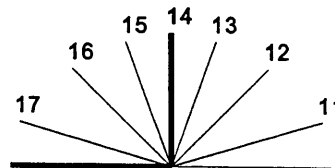
49. Head Restraint Type/Damage by Occupant at This Occupant Position 1
 (0) No head restraints
 (1) Integral—no damage
 (2) Integral—damaged during accident
 (3) Adjustable—no damage
 (4) Adjustable—damaged during accident
 (5) Add-on—no damage
 (6) Add-on—damaged during accident
 (8) Other (specify):
 (9) Unknown
50. Seat Type (this Occupant Position) 09
 (00) Occupant not seated or no seat
 (01) Bucket
 (02) Bucket with folding back
 (03) Bench
 (04) Bench with separate back cushions
 (05) Bench with folding back(s)
 (06) Split bench with separate back cushions
 (07) Split bench with folding back(s)
 (08) Pedestal (i.e., column supported)
 (09) Box mounted seat (i.e., van type)
 (10) Other seat type (specify):
 (99) Unknown
51. Seat Orientation (this Occupant Position) 1
 (0) Occupant not seated or no seat
 (1) Forward facing seat
 (2) Rear facing seat
 (3) Side facing seat (inward)
 (4) Side facing seat (outward)
 (8) Other (specify):
 (9) Unknown
52. Seat Track Adjusted Position Prior To Impact 4
 (0) Occupant not seated or no seat
 (1) Non-adjustable seat track
- Adjustable Seat Track*
 (2) Seat at forward most track position
 (3) Seat between forward most and middle track positions
 (4) Seat at middle track position
 (5) Seat between middle and rear most track positions
 (6) Seat at rear most track position
 (9) Unknown

HEAD RESTRAINT AND SEAT EVALUATION *continued*53. Seat Back Incline Prior and Post Impact 2, 3

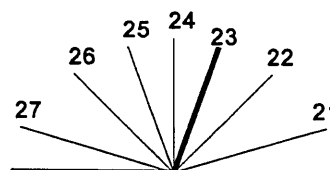
- (00) Occupant not seated or no seat
 (01) Not adjustable

Upright prior to impact

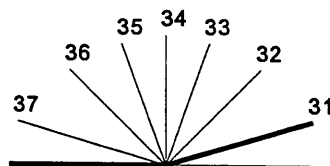
- (11) Moved to completely rearward position
 (12) Moved to rearward midrange position
 (13) Moved to slightly rearward position
 (14) Retained pre-impact position
 (15) Moved to slightly forward position
 (16) Moved to forward midrange position
 (17) Moved to completely forward position.

***Slightly reclined prior to impact***

- (21) Moved to completely rearward position
 (22) Moved to rearward midrange position
 (23) Retained pre-impact position
 (24) Moved to upright position
 (25) Moved to slightly forward position
 (26) Moved to forward midrange position
 (27) Moved to completely forward position

***Completely reclined prior to impact***

- (31) Retained pre-impact position
 (32) Moved to rearward midrange position
 (33) Moved to slightly rearward position
 (34) Moved to upright position
 (35) Moved to slightly forward position
 (36) Moved to forward midrange position
 (37) Moved to completely forward position



(99) Unknown

54. Seat Performance (this Occupant Position) 1

- (0) Occupant not seated or no seat
 (1) No seat performance failure(s)
 (2) Seat adjusters failed
 (3) Seat back folding locks or "seat back" failed
 (specify): _____
 (4) Seat track/anchors failed
 (5) Deformed by impact of occupant
 (6) Deformed by passenger compartment intrusion, (specify): _____
 (7) Combination of above (specify): _____
 (8) Other (specify): _____
 (9) Unknown

CHILD SAFETY SEAT

55. Child Safety Seat Make/Model

(000) No child safety seat

Applicable codes are found in your NASS CDS
Data Collection, Coding and Editing

(950) Built-in child safety seat

(997) Other make/model (specify):

(998) Unknown make/model

(999) Unknown if child safety seat used

56. Type of Child Safety Seat

(0) No child safety seat

(1) Infant seat

(2) Toddler seat

(3) Convertible seat

(4) Booster seat - with shield

(5) Booster seat - without shield

(7) Other type child safety seat (specify):

(8) Unknown child safety seat type

(9) Unknown if child safety seat used

57. Child Safety Seat Orientation

(00) No child safety seat

Designed for Rear Facing for This Age/Weight

(01) Rear facing

(02) Forward facing

(08) Other orientation (specify):

(09) Unknown orientation

Designed For Forward Facing for This Age/Weight

(11) Rear facing

(12) Forward facing

(18) Other orientation (specify):

(19) Unknown orientation

*Unknown Design or Orientation For This
Age/Weight, or Unknown Age/Weight*

(21) Rear facing

(22) Forward facing

(28) Other orientation (specify):

(29) Unknown orientation

(99) Unknown if child safety seat used

58. Child Safety Seat Harness Usage

59. Child Safety Seat Shield Usage

60. Child Safety Seat Tether Usage

Note: Options below applicable to
Variables OA58-OA60.

(00) No child safety seat

Not Designed With Harness/Shield/Tether(01) After market harness/shield/tether
added, not used

(02) After market harness/shield/tether used

(03) Child safety seat used, but no after market
harness/shield/tether added(09) Unknown if harness/shield/tether
added or used*Designed With Harness/Shield/Tether*

(11) Harness/shield/tether not used

(12) Harness/shield/tether used

(19) Unknown if harness/shield/tether used

Unknown If Designed With Harness/Shield/Tether

(21) Harness/shield/tether not used

(22) Harness/shield/tether used

(29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

INJURY CONSEQUENCES61. Injury Severity (Police Rating) 0

- (0) O - No injury
- (1) C - Possible injury
- (2) B - Nonincapacitating injury
- (3) A - Incapacitating injury
- (4) K - Killed
- (5) U - Injury, severity unknown
- (6) Died prior to accident
- (9) Unknown

62. Treatment - Mortality 0

- (0) No treatment
- (1) Fatal
- (2) Fatal - ruled disease (specify):

Nonfatal

- (3) Hospitalization
- (4) Transported and released
- (5) Treatment at scene - nontransported
- (6) Treatment later
- (7) Treatment - other (specify):

- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 0

- (0) Not treated at a medical facility
- (1) Trauma center
- (2) Hospital
- (3) Medical clinic
- (4) Physician's office
- (5) Treatment later at medical facility
- (8) Other (specify):

- (9) Unknown

64. Hospital Stay 00

- (00) Not Hospitalized
- _____ Code the number of days (up through 60) that the occupant stayed in hospital.
- (61) 61 days or more
- (99) Unknown

65. Working Days Lost 99

- _____ Code the number of days (up through 60) that the occupant lost from work due to the accident
- (00) No working days lost
- (61) 61 days or more
- (62) Fatally injured
- (97) Not working prior to accident
- (99) Unknown

STOP WORK HERE**VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

TO BE CODED BY THE ZONE CENTER**INJURY CONSEQUENCES**66. Time to Death 00

Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, ... n days = 30 + n up through 30 days = 60)

- (00) Not fatal
(96) Fatal - ruled disease
(99) Unknown

67. 1st Medically Reported Cause of Death 0068. 2nd Medically Reported Cause of Death 0069. 3rd Medically Reported Cause of Death 00

Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death

- (00) Not fatal or no additional causes
(96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) Other result (includes fatal ruled disease) (specify):

(99) Unknown

70. Number of Recorded Injuries for This Occupant 00

Code the actual number of injuries recorded for this occupant.

- (00) No recorded injuries
(97) Injured, details unknown
(99) Unknown if injured

TRAUMA DATA71. Glasgow Coma Scale (GCS) Score (at Medical Facility) 00

- (00) Not injured
(01) Injured - not treated at medical facility
(02) No GCS Score at medical facility
(03-15) Code the actual value of the initial GCS Score recorded at medical facility.
(97) Injured, details unknown
(99) Unknown if injured

72. Was the Occupant Given Blood? 1

(1) No - blood not given

(2) Yes - blood given

(specify units):

(9) Unknown if blood given

73. Arterial Blood Gases (ABG) - HCO₃ 00

- (00) Not injured
(01) Injured, ABGs not measured or reported
(02-50) Code the actual value of the HCO₃
(96) ABGs reported, HCO₃ unknown
(97) Injured, details unknown
(99) Unknown if injured

BELT USE DETERMINATION74. Primary Source of Belt Use Determination 1

(0) Not equipped/not available/destroyed or rendered inoperative

(1) Vehicle inspection

(2) Official injury data

(3) Driver/occupant interview

(8) Other (specify):

(9) Unknown if belt used



OCCUPANT ASSESSMENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. ~~Primary Sampling Unit Number~~

2. Case Number - Stratum

3. Vehicle Number

4. Occupant Number

OCCUPANT'S CHARACTERISTICS

5. Occupant's Age

Code actual age at time of accident.

(00) Less than one year old (specify by month):

(97) 97 years and older

(99) Unknown

6. Occupant's Sex

(1) Male

(2) Female-not reported pregnant

(3) Female-pregnant-1st trimester(1st-3rd month)

(4) Female-pregnant-2nd trimester(4th-6th month)

(5) Female-pregnant-3rd trimester(7th-9th month)

(6) Female-pregnant-term unknown

(9) Unknown

7. Occupant's Height

Code actual height to the nearest centimeter.

(999) Unknown

21 inches X 2.54 = 053 centimeters

8. Occupant's Weight

Code actual weight to the nearest kilogram.

(999) Unknown

010 pounds X .4536 = 4.53 kilograms

9. Occupant's Role

(1) Driver

(2) Passenger

(9) Unknown

OCCUPANT'S SEATING

10. Occupant's Seat Position

Front Seat

(11) Left side

(12) Middle

(13) Right side

(14) Other (specify):

(15) On or in the lap of another occupant

Second Seat

(21) Left side

(22) Middle

(23) Right side

(24) Other (specify):

(25) On or in the lap of another occupant

Third Seat

(31) Left side

(32) Middle

(33) Right side

(34) Other (specify):

(35) On or in the lap of another occupant

Fourth Seat

(41) Left side

(42) Middle

(43) Right side

(44) Other (specify):

(45) On or in the lap of another occupant

(97) In or on unenclosed area

(98) Other seat (specify):

(99) Unknown

11. Occupant's Posture

(0) Normal posture

Abnormal posture

(1) Kneeling or standing on seat

(2) Lying on or across seat

(3) Kneeling, standing or sitting in front of seat

(4) Sitting sideways or turned to talk with another occupant or to look out a rear window

(5) Sitting on a console

(6) Lying back in a reclined seat position

(7) Bracing with feet or hands on a surface in front of seat

(8) Other abnormal posture (specify):

Normal posture in rear facing child seat

(9) Unknown

EJECTION/ENTRAPMENT

12. Ejection 0

- (0) No ejection
- (1) Complete ejection
- (2) Partial ejection
- (3) Ejection, unknown degree
- (9) Unknown

13. Ejection Area 0

- (0) No ejection
- (1) Windshield
- (2) Left front
- (3) Right front
- (4) Left rear
- (5) Right rear
- (6) Rear
- (7) Roof
- (8) Other area (e.g., back of pickup, etc.)
(specify): _____
- (9) Unknown

14. Ejection Medium 0

- (0) No ejection
- (1) Door/hatch/tailgate
- (2) Nonfixed roof structure
- (3) Fixed glazing
- (4) Nonfixed glazing (specify): _____
- (5) Integral structure
- (8) Other medium (specify): _____
- (9) Unknown

15. Medium Status (Immediately Prior To Impact) 0

- (0) No ejection
- (1) Open
- (2) Closed
- (3) Integral structure
- (9) Unknown

16. Entrapment 0

- (0) Not entrapped/exit not inhibited
- (1) Entrapped/pinned - mechanically restrained
- (2) Could not exit vehicle due to jammed doors, fire, etc.
(specify): _____
- (9) Unknown

17. Occupant Mobility 1

- (0) Occupant fatal before removed from vehicle
- (1) Removed from vehicle while unconscious or not oriented to time or place
- (2) Removed from vehicle due to perceived serious injuries
- (3) Exited vehicle with some assistance
- (4) Exited vehicle under own power
- (5) Occupant fully ejected
- (8) Removed from vehicle for other reasons
(specify): _____
- (9) Unknown

BELT SYSTEM FUNCTION

18. Manual (Active) Belt System Availability 4

- (0) None available
- (1) Belt removed/destroyed
- (2) Shoulder belt
- (3) Lap belt
- (4) Lap and shoulder belt
- (5) Belt available—type unknown

Integral Belt Partially Destroyed

- (6) Shoulder belt (lap belt destroyed/removed)
- (7) Lap belt (shoulder belt destroyed/removed)
- (8) Other belt (specify): _____

(9) Unknown

19. Manual (Active) Belt System Use 13

- (00) None used, not available, or belt removed/destroyed
- (01) Inoperative (specify): _____

- (02) Shoulder belt
- (03) Lap belt
- (04) Lap and shoulder belt
- (05) Belt used—type unknown
- (08) Other belt used (specify): _____

- (12) Shoulder belt used with child safety seat
- (13) Lap belt used with child safety seat
- (14) Lap and shoulder belt used with child safety seat
- (15) Belt used with child safety seat—type unknown
- (18) Other belt used with child safety seat (specify): _____
- (99) Unknown if belt used

20. Proper Use of Manual (Active) Belts 2

- (0) None used or not available
- (1) Belt used properly
- (2) Belt used properly with child safety seat

Belt Used Improperly

- (3) Shoulder belt worn under arm
- (4) Shoulder belt worn behind back or seat
- (5) Belt worn around more than one person
- (6) Lap belt worn on abdomen
- (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): _____

(8) Other improper use of manual belt system (specify): _____

(9) Unknown

21. Manual (Active) Belt Failure Modes During Accident 1

- (0) No manual belt used or not available
- (1) No manual belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify): _____

- (6) Broken retractor
- (7) Combination of above (specify): _____

(8) Other manual belt failure (specify): _____

(9) Unknown

22. Manual Shoulder Belt Upper Anchorage Adjustment 4

- (0) No manual shoulder belt
- (1) No upper anchorage adjustment for manual shoulder belt

Adjustable shoulder Belt Upper Anchorage

- (2) In full up position
- (3) In mid position
- (4) In full down position
- (5) Position unknown
- (9) Unknown if position has adjustable upper anchorage adjustment

23. Automatic (Passive) Belt System Availability/Function 0

- (0) Not equipped/not available
- (1) 2 point automatic belts
- (2) 3 point automatic belts
- (3) Automatic belts - type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

24. Automatic (Passive) Belt System Use 0

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): _____
- (3) Automatic belt use unknown
- (9) Unknown

25. Automatic (Passive) Belt System Type 0

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

26. Proper Use of Automatic (Passive) Belt System 0

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- (2) Automatic belt used properly with child safety seat

Automatic Belt Used Improperly

- (3) Automatic shoulder belt worn under arm
- (4) Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- (6) Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or

automatic shoulder belt used improperly with child safety seat (specify): _____

- (8) Other improper use of automatic belt system (specify): _____
- (9) Unknown

27. Automatic (Passive) Belt Failure Modes During Accident 0

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- (2) Torn webbing (stretched webbing not included)
- (3) Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify): _____

- (6) Broken retractor
- (7) Combination of above (specify): _____
- (8) Other automatic belt failure (specify): _____

(9) Unknown

POLICE REPORTED RESTRAINT USE

AIR BAG SYSTEM FUNCTION

28. Police Reported Belt Use 6

- (0) None used
 (1) Police did not indicate belt use
 (2) Shoulder belt
 (3) Lap belt
 (4) Lap and shoulder belt
 (5) Belt used, type not specified
 (6) Child safety seat
 (7) Automatic belt
 (8) Other type belt, (specify):

(9) Police indicated "unknown"

29. Police Reported Air Bag Availability/Function 2

- (0) No air bag available
 (1) Police did not indicate air bag availability/function
 (2) Deployed
 (3) Not deployed
 (4) Unknown if deployed
 (9) Police indicated "unknown"

Check the Primary Source Used In Determining Belt Use.

- ☒ Vehicle inspection
☐ Official injury data
☐ Driver/occupant interview
☐ Other (specify):

☐ Unknown if belt used

30. Frontal Air Bag System 1

Availability/Function
 (This Occupant Position)

- (0) Not equipped/not available
 (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):

- (3) Air bag not reinstalled
 (9) Unknown

31. Frontal Air Bag System Deployment (This Occupant Position) 1

- (0) Not equipped/not available
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

32. Other Than First Seat Frontal Air Bag Availability/Function 0

(This Occupant Position)
 (0) Not equipped/not available
 (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):

- (3) Air bag not reinstalled
 (9) Unknown

Specify type of "other" air bag present:

33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) 0

- (0) Not equipped with an "other" air bag
 (1) Deployed during accident (as a result of impact)
 (2) Deployed inadvertently just prior to accident
 (3) Deployed, details unknown
 (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
 (5) Unknown if deployed
 (7) Nondeployed
 (9) Unknown

34. Are There Indications of Air Bag System Failure? 1

- (This Occupant Position)
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify):

(9) Unknown

FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION

35. Had Vehicle Been in Previous Accident(s)? 1

- (0) Not equipped/not available
(1) No previous accidents

Yes

- (2) Previous accident(s) without deployment(s)
(3) One previous accident with deployment
(4) More than one previous accident with at least one deployment
(8) Previous accidents, unknown deployment status
(9) Unknown

36. Type of Air Bag 1

- (0) Not equipped/not available
(1) Original manufacturer installed system
(2) Retrofitted air bag
(3) Replacement air bag
(8) Unknown type of air bag
(9) Unknown

37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? 1

- (0) Not equipped/not available
(1) No prior maintenance
(2) Yes, prior maintenance (specify):

(9) Unknown

38. Air Bag Deployment Accident Event Sequence Number 01

- (00) Not equipped/not available

Code the accident event sequence number that initiated the air bag deployment
(96) Deployed, unknown event
(97) Not deployed
(98) Unknown if deployed
(99) Unknown

39. CDC For Air Bag Deployment Impact 1

- (0) Not equipped/not available
(1) Highest delta V
(2) Second highest delta V
(3) Other non-coded delta V (specify):

(6) Deployed, unknown event
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

40. Longitudinal Component of Delta V For Air Bag Deployment Impact +0017

- (_000) Not equipped/not available
Code the value of the delta V for the impact that initiated the air bag deployment
(_996) Deployment, unknown longitudinal Delta V
(_997) Not deployed
(_998) Unknown if deployed
(_999) Unknown

41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? 2

- (0) Not equipped/not available
(1) No
(2) Yes
(3) Deployed, unknown if flap(s) opened at designated tear points
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

42. Were Air Bag Module Cover Flap(s) Damaged? 1

- (0) Not equipped/not available
(1) No
(2) Yes (specify):
(3) Deployed, unknown if air bag module cover flap(s) damaged
(7) Not deployed
(8) Unknown if deployed
(9) Unknown

43. Was There Damage To The Air Bag? 04

- (00) Not equipped/not available
(01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
(03) Cut
(04) Torn
(05) Holed
(06) Burned
(07) Abraded
(88) Other damage (specify):

- (95) Damaged, details unknown
(96) Deployed, unknown if damaged
(97) Not deployed
(98) Unknown if deployed
(99) Unknown

**FIRST SEAT FRONTAL AIR BAG SYSTEM
EVALUATION** *continued***HEAD RESTRAINT AND SEAT EVALUATION**

44. Source of Air Bag Damage 06
 (00) Not equipped/not available
 (01) Not damaged
 (02) Object worn by occupant, (specify):
 (03) Object carried by occupant, (specify):
 (04) Adaptive/assistive controls, (specify):
 (05) Fire in vehicle
 (06) Thermal burns
 (07) Rescue or emergency efforts
 (08) Other damage source (specify):
 (95) Damaged, unknown source
 (96) Deployed, unknown if damaged
 (97) Not deployed
 (98) Unknown if deployed
 (99) Unknown
45. Was The Air Bag Tethered? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify number of tether straps):
 (3) Deployed, unknown if tethered
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
46. Did The Air Bag Have Vent Ports? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify number of vent ports):
 (3) Deployed, unknown if vent ports present
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
47. Was the Air Bag in this Occupant's Position Contacted by Another Occupant? 1
 (0) Not equipped/not available
 (1) No
 (2) Yes (specify):
 (3) Deployed, unknown if other occupant contact to air bag
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown
48. Was This Occupant Wearing Eye-wear? 1
 (0) Not air bag equipped/air bag not available
 (1) No
 (2) Eyeglasses/sunglasses
 (3) Contact lenses
 (4) Deployed, unknown if eyewear worn
 (7) Not deployed
 (8) Unknown if deployed
 (9) Unknown

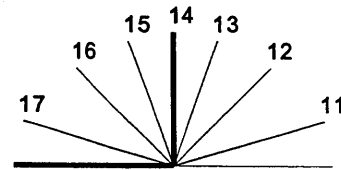
49. Head Restraint Type/Damage by Occupant at This Occupant Position 3
 (0) No head restraints
 (1) Integral—no damage
 (2) Integral—damaged during accident
 (3) Adjustable—no damage
 (4) Adjustable—damaged during accident
 (5) Add-on—no damage
 (6) Add-on—damaged during accident
 (8) Other (specify):
 (9) Unknown
50. Seat Type (this Occupant Position) 09
 (00) Occupant not seated or no seat
 (01) Bucket
 (02) Bucket with folding back
 (03) Bench
 (04) Bench with separate back cushions
 (05) Bench with folding back(s)
 (06) Split bench with separate back cushions
 (07) Split bench with folding back(s)
 (08) Pedestal (i.e., column supported)
 (09) Box mounted seat (i.e., van type)
 (10) Other seat type (specify):
 (99) Unknown
51. Seat Orientation (this Occupant Position) 1
 (0) Occupant not seated or no seat
 (1) Forward facing seat
 (2) Rear facing seat
 (3) Side facing seat (inward)
 (4) Side facing seat (outward)
 (8) Other (specify):
 (9) Unknown
52. Seat Track Adjusted Position Prior To Impact 2
 (0) Occupant not seated or no seat
 (1) Non-adjustable seat track
- Adjustable Seat Track*
 (2) Seat at forward most track position
 (3) Seat between forward most and middle track positions
 (4) Seat at middle track position
 (5) Seat between middle and rear most track positions
 (6) Seat at rear most track position
 (9) Unknown

HEAD RESTRAINT AND SEAT EVALUATION *continued*53. Seat Back Incline Prior and Post Impact 23

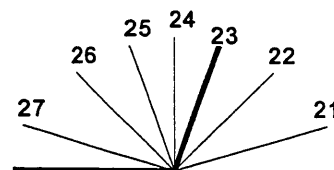
- (00) Occupant not seated or no seat
 (01) Not adjustable

Upright prior to impact

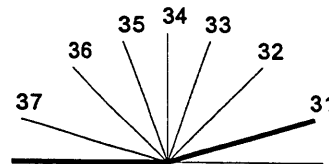
- (11) Moved to completely rearward position
 (12) Moved to rearward midrange position
 (13) Moved to slightly rearward position
 (14) Retained pre-impact position
 (15) Moved to slightly forward position
 (16) Moved to forward midrange position
 (17) Moved to completely forward position

***Slightly reclined prior to impact***

- (21) Moved to completely rearward position
 (22) Moved to rearward midrange position
 (23) Retained pre-impact position
 (24) Moved to upright position
 (25) Moved to slightly forward position
 (26) Moved to forward midrange position
 (27) Moved to completely forward position

***Completely reclined prior to impact***

- (31) Retained pre-impact position
 (32) Moved to rearward midrange position
 (33) Moved to slightly rearward position
 (34) Moved to upright position
 (35) Moved to slightly forward position
 (36) Moved to forward midrange position
 (37) Moved to completely forward position



(99) Unknown

54. Seat Performance (this Occupant Position) 1

- (0) Occupant not seated or no seat
 (1) No seat performance failure(s)
 (2) Seat adjusters failed
 (3) Seat back folding locks or "seat back" failed (specify): _____
 (4) Seat track/anchors failed
 (5) Deformed by impact of occupant
 (6) Deformed by passenger compartment intrusion, (specify): _____
 (7) Combination of above (specify): _____
 (8) Other (specify): _____
 (9) Unknown

CHILD SAFETY SEAT

55. Child Safety Seat Make/Model

(000) No child safety seat

Applicable codes are found in your NASS CDS

Data Collection, Coding and Editing

(950) Built-in child safety seat

(997) Other make/model (specify):

Century

(998) Unknown make/model

(999) Unknown if child safety seat used

56. Type of Child Safety Seat

(0) No child safety seat

(1) Infant seat

(2) Toddler seat

(3) Convertible seat

(4) Booster seat - with shield

(5) Booster seat - without shield

(7) Other type child safety seat (specify):

(8) Unknown child safety seat type

(9) Unknown if child safety seat used

57. Child Safety Seat Orientation

(00) No child safety seat

Designed for Rear Facing for This Age/Weight

(01) Rear facing

(02) Forward facing

(08) Other orientation (specify):

(09) Unknown orientation

Designed For Forward Facing for This Age/Weight

(11) Rear facing

(12) Forward facing

(18) Other orientation (specify):

(19) Unknown orientation

Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight

(21) Rear facing

(22) Forward facing

(28) Other orientation (specify):

(29) Unknown orientation

(99) Unknown if child safety seat used

58. Child Safety Seat Harness Usage

59. Child Safety Seat Shield Usage

60. Child Safety Seat Tether Usage

Note: Options below applicable to Variables OA58-OA60.

(00) No child safety seat

Not Designed With Harness/Shield/Tether

(01) After market harness/shield/tether added, not used

(02) After market harness/shield/tether used

(03) Child safety seat used, but no after market harness/shield/tether added

(09) Unknown if harness/shield/tether added or used

Designed With Harness/Shield/Tether

(11) Harness/shield/tether not used

(12) Harness/shield/tether used

(19) Unknown if harness/shield/tether used

Unknown If Designed With Harness/Shield/Tether

(21) Harness/shield/tether not used

(22) Harness/shield/tether used

(29) Unknown if harness/shield/tether used

(99) Unknown if child safety seat used

INJURY CONSEQUENCES61. Injury Severity (Police Rating) 4

- (0) O - No injury
- (1) C - Possible injury
- (2) B - Nonincapacitating injury
- (3) A - Incapacitating injury
- (4) K - Killed
- (5) U - Injury, severity unknown
- (6) Died prior to accident
- (9) Unknown

62. Treatment - Mortality 1

- (0) No treatment
- (1) Fatal
- (2) Fatal - ruled disease (specify):

Nonfatal

- (3) Hospitalization
- (4) Transported and released
- (5) Treatment at scene - nontransported
- (6) Treatment later
- (7) Treatment - other (specify):

- (8) Transported to a medical facility-unknown if treated
- (9) Unknown

63. Type Of Medical Facility (for Initial Treatment) 2

- (0) Not treated at a medical facility
- (1) Trauma center
- (2) Hospital
- (3) Medical clinic
- (4) Physician's office
- (5) Treatment later at medical facility
- (8) Other (specify):

- (9) Unknown

64. Hospital Stay 00

- (00) Not Hospitalized
_____ Code the number of days (up through 60)
that the occupant stayed in hospital.
- (61) 61 days or more
- (99) Unknown

65. Working Days Lost 97

- _____ Code the number of days
(up through 60) that the occupant
lost from work due to the accident
- (00) No working days lost
- (61) 61 days or more
- (62) Fatally injured
- (97) Not working prior to accident
- (99) Unknown

STOP WORK HERE**VARIABLES 66-74****TO BE CODED BY THE ZONE CENTER**

TO BE CODED BY THE ZONE CENTER**INJURY CONSEQUENCES****TRAUMA DATA**

66. Time to Death

01

Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, ... n days = 30 + n up through 30 days = 60)

- (00) Not fatal
(96) Fatal - ruled disease
(99) Unknown

L 1hr

67. 1st Medically Reported Cause of Death

03

68. 2nd Medically Reported Cause of Death

04

69. 3rd Medically Reported Cause of Death

05

Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death

- (00) Not fatal or no additional causes
(96) Mode of death given but specific injuries are not linked to cause of death. (specify):

(97) Other result (includes fatal ruled disease) (specify):

(99) Unknown

70. Number of Recorded Injuries for This Occupant

09

Code the actual number of injuries recorded for this occupant.

- (00) No recorded injuries
(97) Injured, details unknown
(99) Unknown if injured

71. Glasgow Coma Scale (GCS) Score (at Medical Facility)

97

- (00) Not injured
(01) Injured - not treated at medical facility
(02) No GCS Score at medical facility
(03-15) Code the actual value of the initial GCS Score recorded at medical facility.
(97) Injured, details unknown
(99) Unknown if injured

72. Was the Occupant Given Blood?

1

- (1) No - blood not given
(2) Yes - blood given

(specify units):

- (9) Unknown if blood given

73. Arterial Blood Gases (ABG) - HCO₃01

- (00) Not injured
(01) Injured, ABGs not measured or reported
(02-50) Code the actual value of the HCO₃
(96) ABGs reported, HCO₃ unknown
(97) Injured, details unknown
(99) Unknown if injured

BELT USE DETERMINATION

74. Primary Source of Belt Use Determination

1

- (0) Not equipped/not available/destroyed or rendered inoperative

- (1) Vehicle inspection
(2) Official injury data
(3) Driver/occupant interview
(8) Other (specify):

- (9) Unknown if belt used



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U.S. Department of Transportation
National Highway Traffic Safety
Administration

OCCUPANT INJURY FORM

Form Approved
O.M.B. No. 2127-0021
NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number	3. Vehicle Number <u>01</u>
2. Case Number - Stratum <u>CA 96-16</u>	4. Occupant Number <u>02</u>

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

Source of Injury Data	Body Region	A.I.S. - 90				Injury Source Confidence Level	Direct/Indirect Injury	Occupant Area Intrusion Number				
		Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity							
<i>Reverse skull FX</i>	5. <u>1</u>	6. <u>1</u>	7. <u>5</u>	8. <u>04</u>	9. <u>02</u>	10. <u>2</u>	11. <u>5</u>	12. <u>180/185</u>	13. <u>1</u>	14. <u>2</u>	15. <u>00</u>	<i>HLF</i>
<i>skull FX</i>	16. <u>1</u>	17. <u>1</u>	18. <u>5</u>	19. <u>02</u>	20. <u>02</u>	21. <u>3</u>	22. <u>8</u>	23. <u>180/185</u>	24. <u>1</u>	25. <u>2</u>	26. <u>00</u>	<i>HLF HRF</i>
<i>Subdural emorrhage</i>	27. <u>1</u>	28. <u>1</u>	29. <u>4</u>	30. <u>06</u>	31. <u>50</u>	32. <u>4</u>	33. <u>2</u>	34. <u>180/185</u>	35. <u>1</u>	36. <u>2</u>	37. <u>00</u>	<i>HLU</i>
<i>Subdural emorrhage</i>	38. <u>1</u>	39. <u>1</u>	40. <u>4</u>	41. <u>06</u>	42. <u>50</u>	43. <u>4</u>	44. <u>1</u>	45. <u>180/185</u>	46. <u>1</u>	47. <u>2</u>	48. <u>00</u>	<i>HLU</i>
<i>Fracture of occipital base of skull</i>	49. <u>1</u>	50. <u>1</u>	51. <u>4</u>	52. <u>06</u>	53. <u>88</u>	54. <u>4</u>	55. <u>1</u>	56. <u>180/185</u>	57. <u>1</u>	58. <u>2</u>	59. <u>00</u>	<i>HLB-4 HILB-4</i>
<i>Local subarachnoid emorrhage</i>	60. <u>1</u>	61. <u>1</u>	62. <u>4</u>	63. <u>06</u>	64. <u>84</u>	65. <u>3</u>	66. <u>1</u>	67. <u>180/185</u>	68. <u>1</u>	69. <u>2</u>	70. <u>00</u>	<i>HLUB-3</i>
<i>IFS contusion</i>	71. <u>1</u>	72. <u>1</u>	73. <u>4</u>	74. <u>06</u>	75. <u>02</u>	76. <u>3</u>	77. <u>9</u>	78. <u>180/185</u>	79. <u>1</u>	80. <u>2</u>	81. <u>00</u>	<i>HUCB-3</i>
<i>Posterior scalp laceration</i>	82. <u>1</u>	83. <u>1</u>	84. <u>9</u>	85. <u>04</u>	86. <u>02</u>	87. <u>1</u>	88. <u>6</u>	89. <u>180/185</u>	90. <u>1</u>	91. <u>2</u>	92. <u>00</u>	<i>HPCI-1</i>
<i>Superior scalp laceration</i>	93. <u>1</u>	94. <u>1</u>	95. <u>9</u>	96. <u>04</u>	97. <u>02</u>	98. <u>1</u>	99. <u>5</u>	100. <u>180/185</u>	101. <u>1</u>	102. <u>2</u>	103. <u>00</u>	<i>HACI-1</i>
10th	104. <u> </u>	105. <u> </u>	106. <u> </u>	107. <u> </u>	108. <u> </u>	109. <u> </u>	110. <u> </u>	111. <u> </u>	112. <u> </u>	113. <u> </u>	114. <u> </u>	

OCCUPANT INJURY CLASSIFICATION

Body Region	Specific Anatomic Structure	Level of Injury	Aspect
(1) Head		Specific injuries are assigned consecutive two-digit numbers beginning with 02.	(1) Right
(2) Face			(2) Left
(3) Neck	<u>Vessels, Nerves, Organs,</u>	To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.	(3) Bilateral
(4) Thorax	<u>Bones, Joints</u> are assigned consecutive two digit numbers beginning with 02.		(4) Central
(5) Abdomen		The exceptions to this rule apply to:	(5) Anterior
(6) Spine			(6) Posterior
(7) Upper Extremity		The exceptions to this rule apply to:	(7) Superior
(8) Lower Extremity			(8) Inferior
(9) Unspecified			(9) Unknown
			(0) Whole region
Type of Anatomic Structure	<u>Whole Area</u>		
(1) Whole Area	(02) Skin - Abrasion		
(2) Vessels	(04) Skin - Contusion		
(3) Nerves	(06) Skin - Laceration		
(4) Organs (includes Muscles/ligaments)	(08) Skin - Avulsion		
(5) Skeletal (includes joints)	(10) Amputation		
(6) Head - LOC	(20) Burn		
(9) Skin	(30) Crush		
	(40) Degloving		
	(50) Injury - NFS		
	(90) Trauma, other than mechanical		
	<u>Head - LOC</u>		
	(02) Length of LOC		
	(04) Level		
	(06) of		
	(08) Consciousness		
	(10) Concussion		
	<u>Spine</u>		
	(02) Cervical		
	(04) Thoracic		
	(06) Lumbar		

Abbreviated Injury Scale

- (1) Minor Injury
- (2) Moderate Injury
- (3) Serious Injury
- (4) Severe Injury
- (5) Critical Injury
- (6) Maximum (untreatable)
- (7) Injured, unknown severity

SOURCE OF INJURY DATA

INJURY SOURCE

DIRECT/INDIRECT INJURY

CONFIDENCE LEVEL

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify): _____
- (9) Police

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

- (1) Direct contact injury
- (2) Indirect contact injury
- (3) Noncontact injury
- (7) Injured, unknown source

INJURY SOURCES

FRONT

- (001) Windshield
- (002) Mirror
- (003) Sunvisor
- (004) Steering wheel rim
- (005) Steering wheel hub/spoke
- (006) Steering wheel (combination of codes 004 and 005)
- (007) Steering column, transmission selector lever, other attachment
- (008) Cellular telephone or CB radio
- (009) Add on equipment (e.g., tape deck, air conditioner)
- (010) Left instrument panel and below
- (011) Center instrument panel and below
- (012) Right instrument panel and below
- (013) Glove compartment door
- (014) Knee bolster
- (015) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, mirror, or steering assembly (driver side only)
- (016) Windshield including one or more of the following: front header, A (A1/A2)-pillar, instrument panel, or mirror (passenger side only)
- (017) Windshield reinforced by exterior object (specify): _____
- (019) Other front object (specify): _____

LEFT SIDE

- (051) Left side interior surface, excluding hardware or armrests
- (052) Left side hardware or armrest
- (053) Left A (A1/A2)-pillar
- (054) Left B-pillar
- (055) Other left pillar (specify): _____
- (056) Left side window glass
- (057) Left side window frame
- (058) Left side window sill
- (059) Left side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (060) Other left side object (specify): _____

RIGHT SIDE

- (101) Right side interior surface, excluding hardware or armrests

- (102) Right side hardware or armrest
- (103) Right A (A1/A2)-pillar
- (104) Right B-pillar
- (105) Other right pillar (specify): _____
- (106) Right side window glass
- (107) Right side window frame
- (108) Right side window sill
- (109) Right side window glass including one or more of the following: frame, window sill, A (A1/A2)-pillar, B-pillar, or roof side rail.
- (110) Other right side object (specify): _____

INTERIOR

- (151) Seat, back support
- (152) Belt restraint webbing/buckle
- (153) Belt restraint B-pillar or door frame attachment point
- (154) Other restraint system component (specify): _____
- (155) Head restraint system
- (160) Other occupants (specify): _____
- (161) Interior loose objects
- (162) Child safety seat (specify): _____
- (163) Other interior object (specify): _____

AIR BAG

- (170) Air bag-driver side
- (171) Air bag-driver side and eyewear
- (172) Air bag-driver side and jewelry
- (173) Air bag-driver side and object held
- (174) Air bag-driver side and object in mouth
- (175) Air bag compartment cover-driver side
- (176) Air bag compartment cover-driver side and eyewear
- (177) Air bag compartment cover-driver side and jewelry
- (178) Air bag compartment cover-driver side and object held
- (179) Air bag compartment cover-driver side and object in mouth
- (180) Air bag-passenger side
- (181) Air bag-passenger side and eyewear
- (182) Air bag-passenger side and jewelry

- (183) Air bag-passenger side and object held
- (184) Air bag-passenger side and object in mouth
- (185) Air bag compartment cover-passenger side
- (186) Air bag compartment cover-passenger side and eyewear
- (187) Air bag compartment cover-passenger side and jewelry
- (188) Air bag compartment cover-passenger side and object held
- (189) Air bag compartment cover-passenger side and object in mouth
- (190) Other air bag (specify) _____
- (195) Other air bag compartment cover (specify) _____

ROOF

- (201) Front header
- (202) Rear header
- (203) Roof left side rail
- (204) Roof right side rail
- (205) Roof or convertible top

FLOOR

- (251) Floor (including toe pan)
- (252) Floor or console mounted transmission lever, including console
- (253) Parking brake handle
- (254) Foot controls including parking brake

REAR

- (301) Backlight (rear window)
- (302) Backlight storage rack, door, etc.
- (303) Other rear object (specify): _____

ADAPTIVE (ASSISTIVE) DRIVING EQUIPMENT

- (401) Hand controls for braking/acceleration
- (402) Steering control devices (attached to OEM steering wheel)
- (403) Steering knob attached to steering wheel
- (405) Replacement steering wheel (i.e., reduced diameter)
- (406) Joy stick steering controls
- (407) Wheelchair tie-downs
- (408) Modification to seat belts, (specify): _____
- (409) Additional or relocated switches, (specify): _____

- (410) Raised roof

- (411) Wall mounted head rest (used behind wheel chair)
- (412) Other adaptive device (specify): _____

EXTERIOR of OCCUPANT'S VEHICLE

- (451) Hood
- (452) Outside hardware (e.g., outside mirror, antenna)
- (453) Other exterior surface or tires (specify): _____
- (454) Unknown exterior objects

EXTERIOR OF OTHER MOTOR VEHICLE

- (501) Front bumper
- (502) Hood edge
- (503) Other front of vehicle (specify): _____
- (504) Hood
- (505) Hood ornament
- (506) Windshield, roof rail, A-pillar
- (507) Side surface
- (508) Side mirrors
- (509) Other side protrusions (specify): _____
- (510) Rear surface
- (511) Undercarriage
- (512) Tires and wheels
- (513) Other exterior of other motor vehicle (specify): _____
- (514) Unknown exterior of other motor vehicle

OTHER VEHICLE OR OBJECT IN THE ENVIRONMENT

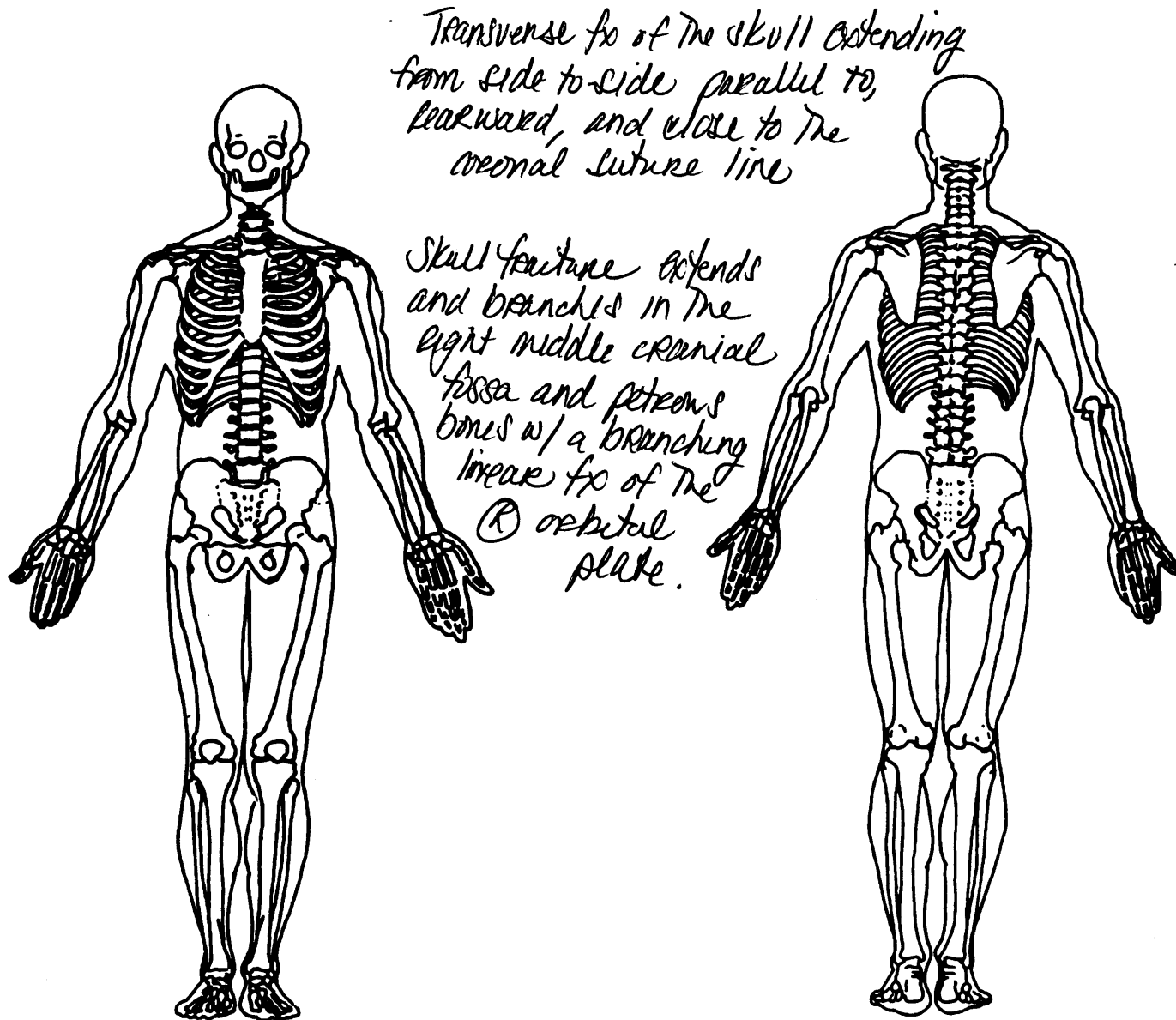
- (551) Ground
- (598) Other vehicle or object (specify): _____
- (599) Unknown vehicle or object

NONCONTACT INJURY

- (601) Fire in vehicle
- (602) Flying glass
- (603) Other noncontact injury source (specify): _____
- (604) Air bag exhaust gases
- (697) Injured, unknown source

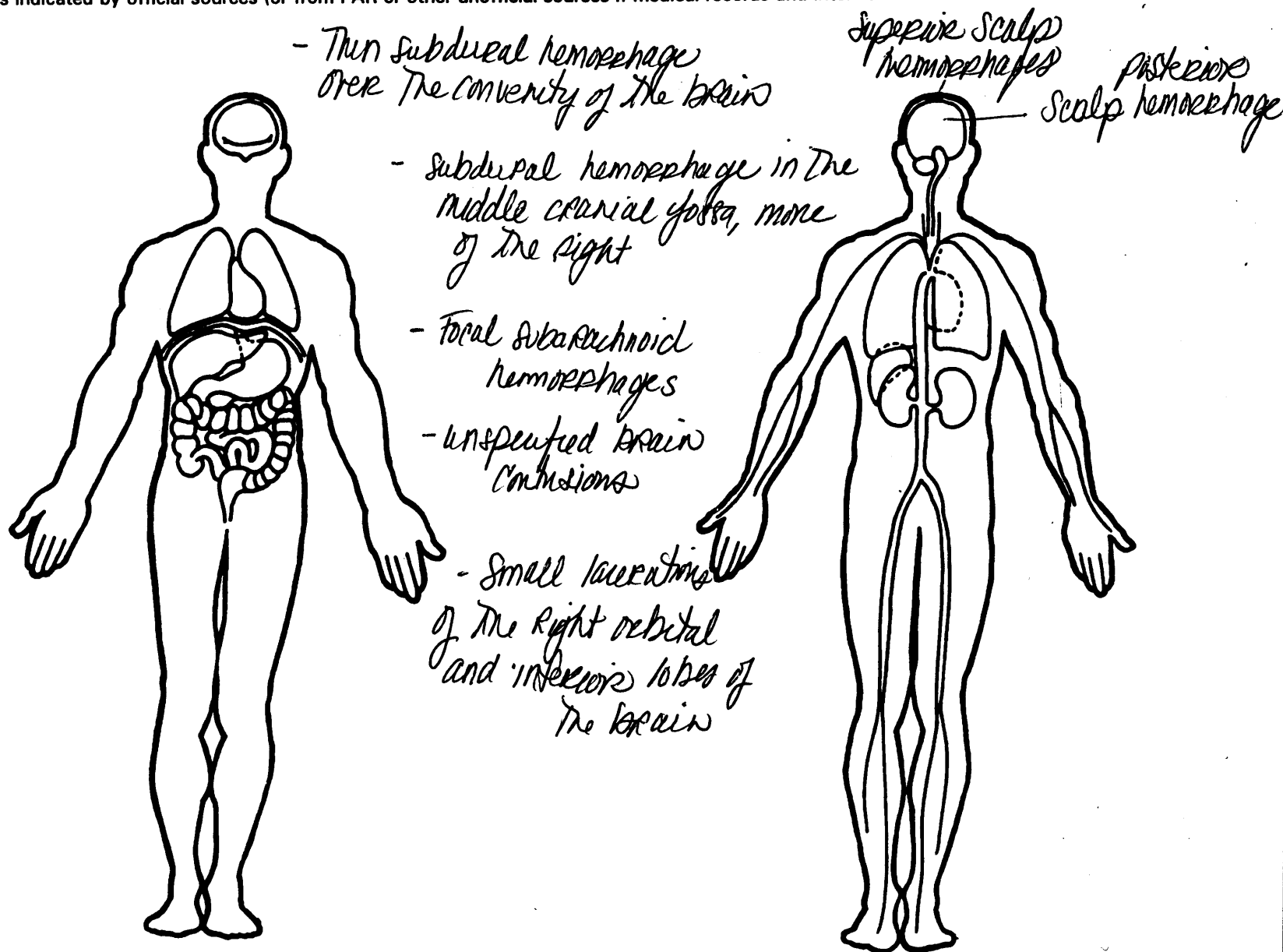
OFFICIAL INJURY DATA — SKELETAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



OFFICIAL INJURY DATA — INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



FLORIDA TRAFFIC CRASH REPORT

BEST AVAILABLE COPY

☒ LONG FORM ☐ SHORT FORM

DO NOT WRITE IN THIS SPACE

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES
TRAFFIC CRASH RECORDS

FLORIDA

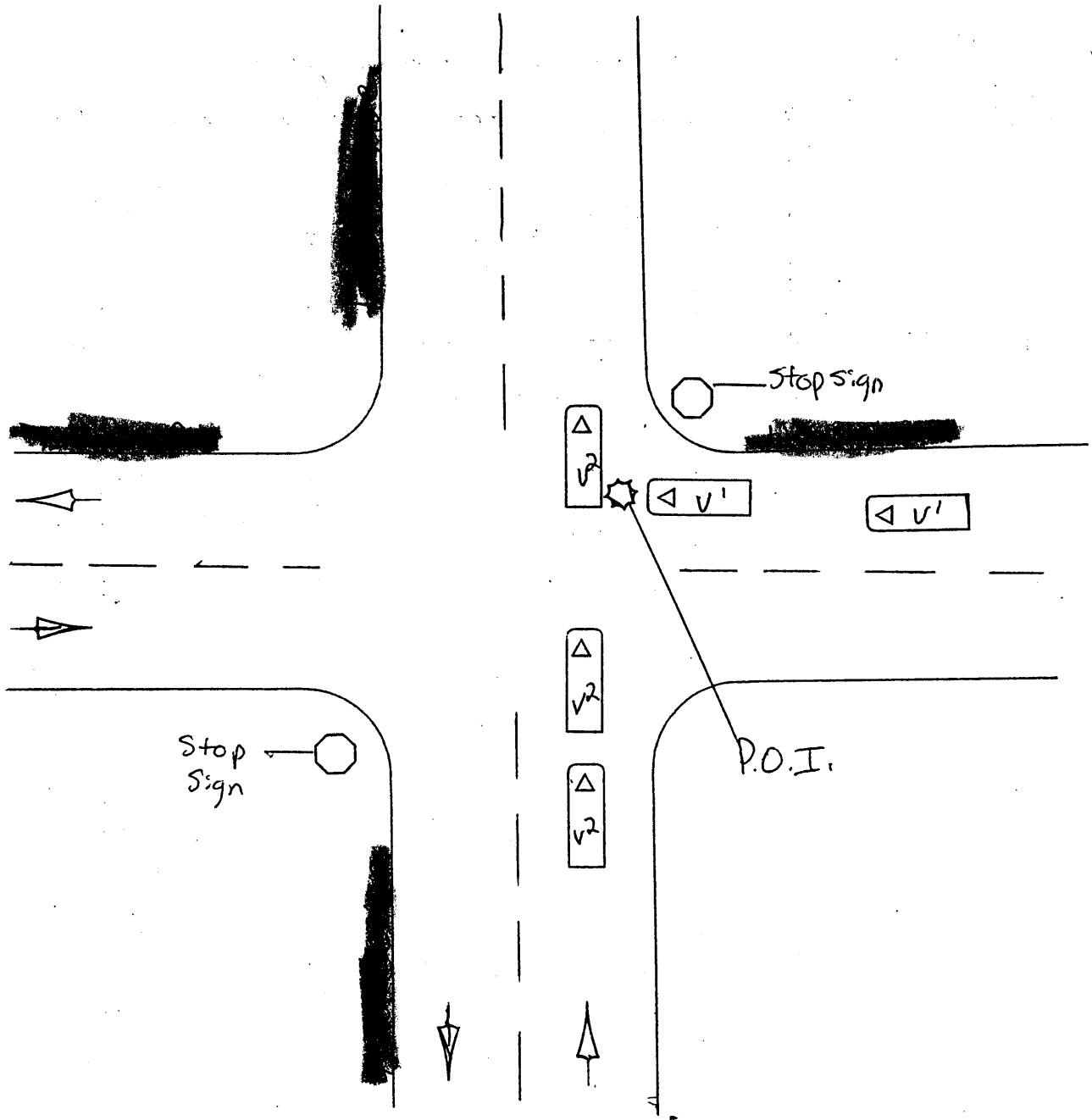
Time & Location	DATE OF CRASH [REDACTED] 96		TIME OF CRASH 1049 AM <input checked="" type="checkbox"/> PM		TIME OFFICER NOTIFIED 1050 AM <input checked="" type="checkbox"/> PM		TIME OFFICER ARRIVED 1052 AM <input checked="" type="checkbox"/> PM		INVEST. AGENCY REPORT NUMBER [REDACTED]		HSMV CRASH REPORT NUMBER [REDACTED]	
	COUNTY / CITY CODE [REDACTED]		Feet or Miles [REDACTED]				CITY OR TOWN [REDACTED]		(Check if in City or Town) <input checked="" type="checkbox"/>		COUNTY [REDACTED]	
	AT NODE NO. or [REDACTED]		FEET / MILES FROM NODE NO. [REDACTED]		NEXT NODE NO. [REDACTED]		NO. OF LANES 2		1 DIVIDED 2 UNDIVIDED		ON STREET, ROAD OR HIGHWAY [REDACTED]	
Section 1	DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A		YEAR 96		MAKE Dodge		TYPE 0201		VEH. LICENSE NUMBER [REDACTED]		STATE FL	
	TRAILER OR TOWED VEHICLE INFORMATION [REDACTED]		YEAR [REDACTED]		MAKE [REDACTED]		TYPE [REDACTED]		VEH. LICENSE NUMBER [REDACTED]		STATE [REDACTED]	
	VEHICLE TRAVELING ON <input checked="" type="checkbox"/> At <input checked="" type="checkbox"/>		Est. MPH 25		Posted Speed 30		EST. VEHICLE DAMAGE \$4,000		1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE \$[REDACTED]	
Section 2	INSURANCE COMPANY (LIABILITY OR PIP) No Proof on Scene		POLICY NUMBER [REDACTED]		VEHICLE REMOVED BY: [REDACTED]		1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other		18 Undercarriage 19 Overturn 20 Windshield 21 Fire 22 Trailer		POINT OF IMPACT CIRCLE AREA OF DAMAGE [REDACTED]	
	OWNER'S FULL NAME (Check if Driver) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY AND STATE [REDACTED]		ZIP CODE [REDACTED]		OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]	
	OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY AND STATE [REDACTED]		ZIP CODE [REDACTED]		OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]	
Section 3	DRIVER (Exactly as on Driver License) / Pedestrian [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY & STATE / ZIP CODE [REDACTED]		DATE OF BIRTH [REDACTED] / 59		DRIVER LICENSE NUMBER [REDACTED]		STATE FL	
	HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No		PLACARDED 1 Yes 2 No		RECOMMEND RE-EXAM 1 Yes 2 No		If YES, Explain in Narrative [REDACTED]		DRIVER'S PHONE NO. [REDACTED]		PASSENGER'S NAME (Additional on Continuation Page) [REDACTED]	
	PASSENGER'S NAME (Additional on Continuation Page) [REDACTED]		CURRENT ADDRESS [REDACTED]		CITY & STATE / ZIP [REDACTED]		AGE [REDACTED]		LOC. [REDACTED]		INJ. [REDACTED]	
Section 4	DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A		YEAR 96		MAKE Chevrolet		TYPE 0101		VEH. LICENSE NUMBER [REDACTED]		STATE FL	
	TRAILER OR TOWED VEHICLE INFORMATION [REDACTED]		YEAR [REDACTED]		MAKE [REDACTED]		TYPE [REDACTED]		VEH. LICENSE NUMBER [REDACTED]		STATE [REDACTED]	
	VEHICLE TRAVELING ON <input checked="" type="checkbox"/> At <input checked="" type="checkbox"/>		Est. MPH 25		Posted Speed 30		EST. VEHICLE DAMAGE \$3,000		1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE \$[REDACTED]	
Section 5	INSURANCE COMPANY (LIABILITY OR PIP) [REDACTED]		POLICY NUMBER [REDACTED]		VEHICLE REMOVED BY: [REDACTED]		1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other		18 Undercarriage 19 Overturn 20 Windshield 21 Fire 22 Trailer		POINT OF IMPACT CIRCLE AREA OF DAMAGE [REDACTED]	
	OWNER'S FULL NAME (Check if Driver) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY AND STATE [REDACTED]		ZIP CODE [REDACTED]		OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]	
	OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY AND STATE [REDACTED]		ZIP CODE [REDACTED]		OWNER'S FULL NAME (Trailer or Towed Vehicle) [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]	
Section 6	DRIVER (Exactly as on Driver License) / Pedestrian [REDACTED]		CURRENT ADDRESS (Number and Street) [REDACTED]		CITY & STATE / ZIP CODE [REDACTED]		DATE OF BIRTH [REDACTED] / 73		DRIVER LICENSE NUMBER [REDACTED]		STATE FL	
	HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No		PLACARDED 1 Yes 2 No		RECOMMEND RE-EXAM 1 Yes 2 No		If YES, Explain in Narrative [REDACTED]		DRIVER'S PHONE NO. [REDACTED]		PASSENGER'S NAME (Additional on Continuation Page) N/A	
	PASSENGER'S NAME (Additional on Continuation Page) N/A		CURRENT ADDRESS [REDACTED]		CITY & STATE / ZIP [REDACTED]		AGE [REDACTED]		LOC. [REDACTED]		INJ. [REDACTED]	
Code Information	VEHICLE TYPE		VEHICLE USE		TRAILER TYPE		RESIDENCE (Driver Only)		PHYSICAL DEFECTS		ALCOHOL / DRUG USE	
	01 Automobile 02 Passenger Van 03 Pickup/Light Truck (2 rear tires) 04 Medium Truck (4 rear tires) 05 Heavy Truck (2 or more rear axles) 06 Truck Tractor (Cab) 07 Motor Home (RV) 08 Bus - 09 Bicycle 10 Motorcycle 11 Moped 12 All Terrain Vehicle 13 Train 77 Other		01 Private Transportation 02 Commercial Passengers 03 Commercial Cargo 04 Public Transportation 05 Private School Bus 06 Private School Bus 07 Ambulance 08 Law Enforcement 09 Fire/Rescue 10 Military 11 Other Government 77 Other		01 Single Semi Trailer 02 Tandem Semi Trailer(s) 03 Tank Trailer 04 Saddle Mount / Flatbed 05 Boat Trailer 06 Utility Trailer 07 House Trailer 08 Pole Trailer 09 Towed Vehicle 77 Other		1 County of Crash 2 Elsewhere in State 3 Non-Resident of State 4 Foreign 5 Unknown DL TYPE 1 A 2 B 3 C 4 D / Chauffeur 5 E / Operator 6 E / Oper-Rest 7 None RACE 1 White 2 Black 3 Hispanic 4 Other		1 No Defects Known 2 Eyesight Defect 3 Fatigue / Asleep 4 Hearing Defect 5 Illness 6 Seizure, Epilepsy, Blackout 7 Other Physical Defect INJURY SEVERITY 1 None 2 Possible 3 Non-Incapacitating 4 Incapacitating 5 Fatal (Within 90 Days) 6 Non-Traffic Fatality		1 Not Drinking or Using Drugs 2 Alcohol - Under Influence 3 Drugs - Under Influence 4 Alcohol & Drugs - Under Influence 5 Had Been Drinking 6 Pending BAC Test Result SAFETY EQUIPMENT IN USE 1 Not in Use 2 Seat Belt / Shoulder Harness 3 Child Restraint 4 Air Bag 5 Safety Helmet 6 Eye Protection	
	LOCATION (In Vehicle) 1 Front Left 2 Front Center 3 Front Right 4 Rear Left 5 Rear Center 6 Rear Right 7 In Body of Truck 8 Bus Passenger 9 Other EJECTED 1 No 2 Yes 3 Partial											

DRIVER ACTION 1 Person 2 Hit & Run 3 N/A		YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	POINT OF IMPACT CIRCLE AREA OF DAMAGE 15 16 17 18 19 20 21 22					
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE		Est. MPH		Posted Speed	EST. VEHICLE DAMAGE 1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE 1 Disabling 2 Functional 3 No Damage					
INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER		VEHICLE REMOVED BY:		1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other								
OWNER'S FULL NAME (Check if Driver)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE								
OWNER'S FULL NAME (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE								
DRIVER (Exactly as on Driver License) / Pedestrian		CURRENT ADDRESS (Number and Street)		CITY & STATE / ZIP CODE		DATE OF BIRTH								
DRIVER LICENSE NUMBER		STATE	DL TYPE	REQ. END.	BAC TEST 3 Urine 1 Blood 4 Refused 2 Breath 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES	RACE	SEX	INJ.	S. EQUIP.	EJECT.
HAZARDOUS MATERIALS BEING TRANSPORTED		1 Yes 2 No	PLACARDED	1 Yes 2 No	RECOMMEND RE-EXAM	1 Yes 2 No	If YES, Explain in Narrative	DRIVER'S PHONE NO.						
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE		LOC.	INJ.	S. EQUIP.	EJECT.			
PROPERTY DAMAGED - OTHER THAN VEHICLES		EST. AMOUNT		OWNER'S NAME		ADDRESS		CITY		STATE		ZIP		
1		\$												
PROPERTY DAMAGED - OTHER THAN VEHICLES		EST. AMOUNT		OWNER'S NAME		ADDRESS		CITY		STATE		ZIP		
2		\$												
CONTRIBUTING CAUSES - DRIVER / PED.		VEHICLE DEFECT		VEHICLE MOVEMENT		VEHICLE SPECIAL FUNCTIONS								
01 No Improper Driving / Action 02 Careless Driving 03 Failed to Yield Right-of-Way 04 Improper Backing 05 Improper Lane Change 06 Improper Turn 07 Alcohol-Under Influence 08 Drugs-Under Influence 09 Alcohol & Drugs-Under Influence Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed to Maintain Equip. / Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic		01 No Defects 02 Def. Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Puncture / Blowout 06 Steering Mech. 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative)		01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering/Leaving Parking Space 08 Properly Parked 09 Improperly Parked 10 Making U-Turn		11 Passing 12 Driverless or Runaway Veh. 77 All Other (Explain in Narrative)		1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance						
19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 77 All Other (Explain)		LOCATION ON ROADWAY 1 On Road 2 Not On Road 3 Shoulder 4 Median 5 Turn Lane / Safety Zone		PEDESTRIAN ACTION 01 Crossing Not at Intersection 02 Crossing at Mid-block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Other Working in Road 08 Standing/Playing in Road 09 Standing in Pedestrian Island 77 All Other (Explain)		LOCATION TYPE 1 Primarily Business 2 Primarily Residential 3 Open Country								
FIRST / SUBSEQUENT HARMFUL EVENT		ROAD SYSTEM IDENTIFIER		LIGHTING CONDITION										
01 Collision With MV in Transport (Rear-end) 02 Collision With MV in Transport (Head-on) 03 Collision With MV in Transport (Angle) 04 Collision With MV in Transport (Left Turn) 05 Collision With MV in Transport (Right Turn) 06 Collision With MV in Transport (Sideswipe) 07 Collision With MV in Transport (Backed Into) 08 Collision With Parked Car 09 Collision With MV on Other Roadway 10 Collision With Pedestrian 11 Collision With Bicycle 12 Collision With Bicycle (Bike Lane) 13 Collision With Moped 14 Collision With Train 15 Collision With Animal 16 MV Hit Sign/Sign Post 17 MV Hit Utility Pole/Light Pole 18 MV Hit Guardrail 19 MV Hit Fence 20 MV Hit Concrete Barrier Wall 21 MV Hit Bridge/Pier/Abutment/Rail 22 MV Hit Tree/Shrubbery 23 Collision With Construction Barricade/Sign 24 Collision With Traffic Gate 25 Collision With Crash Attenuators 26 Collision With Fixed Object Above Road 27 MV Hit Other Fixed Object 28 Collision With Moveable Object On Road 29 MV Ran Into Ditch/Culvert 30 Ran Off Road Into Water 31 Overturned 32 Occupant Fell From Vehicle 33 Tractor/Trailer Jackknifed 34 Fire 35 Explosion 77 All Other (Explain)		01 Interstate 02 U.S. 03 State 04 County 05 Local 06 Turnpike / Toll 07 Forest Road 77 All Other		01 Daylight 02 Dusk 03 Dawn 04 Dark (Street Light) 05 Dark (No Street Light) 06 Unknown										
		ROAD SURFACE / CONDITION		WEATHER		ROAD SURFACE TYPE								
		01 Dry 02 Wet 03 Slippery 04 Icy 77 All Other (Explain)		01 Clear 02 Cloudy 03 Rain 04 Fog 77 All Other (Explain)		01 Slag / Gravel / Stone 02 Blacktop 03 Brick / Block 04 Concrete 05 Dirt 77 All Other (Explain)								
CONTRIBUTING CAUSES - ROAD		CONTRIBUTING CAUSES - ENVIRONMENT		TRAFFIC CONTROL		SITE LOCATION		TRAFFICWAY CHARACTER						
01 No Defects 02 Obstruction With/Without Warning 03 Road Under Repair / Construction 04 Loose Surface Materials 05 Shoulders - Soft / Low / High 06 Holes / Ruts / Unsafe Paved Edge 07 Standing Water 08 Worn / Polished Road Surface 77 All Other (Explain)		01 Vision Not Obscured 02 Inclement Weather 03 Parked / Stopped Vehicle 04 Trees / Crops / Bushes 05 Load on Vehicle 06 Building / Fixed Object 07 Signs / Billboards 08 Fog 09 Smoke 10 Glare 77 All Other (Explain)		01 No Control 02 School Zone 03 Traffic Signal 04 Stop Sign 05 Yield Sign 06 Flashing Light 07 Railroad Signal 08 Officer / Guard / Flagman 09 Posted No U-Turn 10 Special Speed Zone 11 No Passing Zone 77 All Other (Explain)		01 Not At Intersection / RR X'ing / Bridge 02 At Intersection 03 Influenced By Intersection 04 Driveway Access 05 Railroad Crossing 06 Bridge 07 Entrance Ramp 08 Exit Ramp 09 Parking Lot - Public 10 Parking Lot - Private 11 Private Property 77 All Other (Explain)		1 Straight-Level 2 Straight-Upgrade / Downgrade 3 Curve-Level 4 Curve-Upgrade / Downgrade TYPE SHOULDER 1 Paved 2 Unpaved 3 Curb						
VIOLATOR		FL STATUTE NUMBER		NAME		CHARGE		CITATION #						
				Pending										

DIAGRAM



INDICATE NORTH
WITH ARROW



NOT TO SCALE

FLORIDA TRAFFIC CRASH REPORT

NARRATIVE / DIAGRAM
MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES
TRAFFIC CRASH RECORDS
TALLAHASSEE, FLORIDA 32304-0001

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EMS INFO FATALS LY	TIME-EMS NOTIFIED	AM <input type="checkbox"/> PM <input type="checkbox"/>	TIME EMS ARRIVED	AM <input type="checkbox"/> PM <input type="checkbox"/>	COUNTY / CITY CODE	DATE OF CRASH	INVEST. AGENCY REPORT NUMBER	HSMV CRASH REPORT NUMBER
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NARRATIVE / ADDITIONAL PASSENGERS

V² was travelling northbound on [REDACTED]. V¹ was travelling westbound on [REDACTED]. V¹ and V² collided in the intersection of [REDACTED] and [REDACTED]. This officer was dispatched to [REDACTED] in reference to an accident with injuries. This officer was the first officer on scene. Upon my arrival numerous bystanders advised that the Driver of V¹ was at a house on the northeast corner of the intersection with the passenger, her daughter of 7 weeks. This officer attempted to make contact with the driver and passenger [REDACTED] but as I got close to the Driver she began flailing around with the baby in her arms trying to keep everyone away. As this officer tried to speak with the Driver of V¹ [REDACTED] Fire Rescue arrived on scene. This officer walked over to Fire Rescue [REDACTED] to direct the paramedics to Driver and passenger [REDACTED] location. At this time this officer attempted to locate the Driver of V². At first no one on scene would admit to being the Driver of V² but eventually [REDACTED] admitted to be driving the vehicle. Passenger [REDACTED] was immediately being

SEC. #	PASS. #	PASSENGER NAME	ADDRESS	CITY & STATE	ZIP	Age	Loc.	Inj.	Safety Equip.	Eject

VIOLATOR	FL STATUTE NUMBER	NAME	CHARGE	CITATION #
VIOLATOR	FL STATUTE NUMBER	NAME	CHARGE	CITATION #
WITNESS - NAME	ADDRESS	CITY & STATE	ZIP	
1 [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
WITNESS - NAME	ADDRESS	CITY & STATE	ZIP	
2 [REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	
FIRST AID GIVEN BY - NAME	1 Physician or Nurse 2 Paramedic or EMT 3 Police Officer	4 Certified 1st Aider 5 Other	INJURED TAKEN TO	BY - NAME
[REDACTED]	<input checked="" type="checkbox"/> 1 YES <input type="checkbox"/> 2 NO	<input checked="" type="checkbox"/> 4 YES <input type="checkbox"/> 5 NO	[REDACTED]	[REDACTED]
INVESTIGATION MADE AT SCENE?	WHERE?	IS INVESTIGATION COMPLETE?	DATE OF REPORT	PHOTOS TAKEN?
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	[REDACTED]	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	[REDACTED] 96	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR - RANK & SIGNATURE	ID / BADGE NUMBER	DEPARTMENT	FHP	SO
[REDACTED]	[REDACTED]	[REDACTED]	<input type="checkbox"/>	<input checked="" type="checkbox"/>

FLORIDA TRAFFIC CRASH REPORT

☐ UPDATE ☒ CONTINUATION
 MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES
 TRAFFIC CRASH RECORDS
 FLORIDA

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COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER	
YEAR		MAKE		TYPE		VEH. LICENSE NUMBER	
STATE		VEHICLE IDENTIFICATION NUMBER		EST. MPH		Posted Speed	
EST. VEHICLE DAMAGE		1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE		1 Disabling 2 Functional 3 No Damage	
INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER		VEHICLE REMOVED BY:		1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other	
OWNER'S FULL NAME (Check if Driver)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver License) / Pedestrian		CURRENT ADDRESS (Number and Street)		CITY & STATE / ZIP CODE		DATE OF BIRTH	
DRIVER LICENSE NUMBER		STATE		DL TYPE		REQ. END.	
BAC TEST		3 Urine 4 Blood 5 None		RESULTS		AL/DRUG	
HAZARDOUS MATERIALS BEING TRANSPORTED		1 Yes 2 No		PLACARDED		1 Yes 2 No	
RECOMMEND RE-EXAM		1 Yes 2 No		If YES, Explain in Narrative		DRIVER'S PHONE NO.	
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE LOC. INJ. S. EQUIP. EJECT.	

COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER	
YEAR		MAKE		TYPE		VEH. LICENSE NUMBER	
STATE		VEHICLE IDENTIFICATION NUMBER		EST. MPH		Posted Speed	
EST. VEHICLE DAMAGE		1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE		1 Disabling 2 Functional 3 No Damage	
INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER		VEHICLE REMOVED BY:		1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other	
OWNER'S FULL NAME (Check if Driver)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver License) / Pedestrian		CURRENT ADDRESS (Number and Street)		CITY & STATE / ZIP CODE		DATE OF BIRTH	
DRIVER LICENSE NUMBER		STATE		DL TYPE		REQ. END.	
BAC TEST		3 Urine 4 Blood 5 None		RESULTS		AL/DRUG	
HAZARDOUS MATERIALS BEING TRANSPORTED		1 Yes 2 No		PLACARDED		1 Yes 2 No	
RECOMMEND RE-EXAM		1 Yes 2 No		If YES, Explain in Narrative		DRIVER'S PHONE NO.	
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE LOC. INJ. S. EQUIP. EJECT.	

INVESTIGATOR - RANK AND SIGNATURE		ID/BADGE NUMBER		DEPARTMENT		FHP SO CPD OTHER	
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#1	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
#2	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
#3	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
#4	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CONTRIBUTING CAUSES - DRIVER/PED.		VEHICLE DEFECT	VEHICLE MOVEMENT	VEHICLE SPECIAL FUNCTIONS
01 No Improper Driving / Action 02 Careless Driving 03 Failed to Yield Right-of-Way 04 Improper Backing 05 Improper Lane Change 06 Improper Turn 07 Alcohol-Under Influence 08 Drugs-Under Influence 09 Alcohol & Drugs-Under Influence 10 Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed to Maintain Equip./Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic 19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 77 All Other (Explain)		01 No Defects 02 Def. Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Puncture / Blowout 06 Steering Mech. 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative)	01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering / Leaving Parking Space 08 Properly Parked 09 Improperly Parked 10 Making U-Turn 11 Passing 12 Driverless or Runaway Veh. 77 All Other (Explain in Narrative)	1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance 77 All Other (Explain) 88 Unknown
		LOCATION ON ROADWAY	PEDESTRIAN ACTION	
		1 On Road 2 Not On Road 3 Shoulder 4 Median 5 Turn Lane / Safety Zone	01 Crossing Not at Intersection 02 Crossing at Mid-block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Other Working in Road 08 Standing / Playing in Road 09 Standing in Pedestrian Island 77 All Other (Explain) 88 Unknown	

SEC. #	PASS. #	PASSENGER NAME	ADDRESS	CITY & STATE	ZIP	Age	Loc.	Inj.	Safety Equip.	Eject
		<p>treated as a trauma alert case and was transported by Rescue Unit #52 to [REDACTED] where she was later determined to be deceased. Passenger ([REDACTED]) was in a child seat facing the passenger seat, but when the passenger side airbag deployed it caused the injuries to the deceased. Driver of V' was constantly combative with the officer on scene as well as Fire Rescue personnel. Let [REDACTED] of [REDACTED] Fire Rescue noticed a distinct odor of alcohol on the Driver of V's breath and notified this officer. Driver of V' was turned over to [REDACTED] to conduct a DUI investigation ([REDACTED]). This officer also</p>								

WITNESS - NAME	ADDRESS	CITY & STATE	ZIP
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WAS INVESTIGATION MADE AT SCENE?		1 Yes 2 No - Where?		IS INVESTIGATION COMPLETE?		1 Yes 2 No - Why?		DATE OF REPORT	PHOTOS TAKEN?	1 - Yes 2 - No 3 - Investigating Agency 4 - Other	
VIOLATOR	FL STATUTE NUMBER	NAME	CHARGE	CITATION #							

FLORIDA TRAFFIC CRASH REPORT

☐ UPDATE ☒ CONTINUATION
 MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES
 TRAFFIC CRASH RECORDS
 FLORIDA

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		COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER	
DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A		YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	
TRAILER OR TOWED VEHICLE INFORMATION				TRAILER TYPE					
VEHICLE TRAVELING N S E W		ON	At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE 1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE	
INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER		VEHICLE REMOVED BY: 1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other			
OWNER'S FULL NAME (Check if Driver)				CURRENT ADDRESS (Number and Street)				CITY AND STATE ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)				CURRENT ADDRESS (Number and Street)				CITY AND STATE ZIP CODE	
DRIVER (Exactly as on Driver License) / Pedestrian				CURRENT ADDRESS (Number and Street)				CITY & STATE / ZIP CODE DATE OF BIRTH	
DRIVER LICENSE NUMBER		STATE	DL TYPE	REG. END.	BAC TEST 1 Blood 2 Breath 3 Urine 4 Refused 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No		PLACARDED		1 Yes 2 No		RECOMMEND RE-EXAM	1 Yes 2 No	If YES, Explain in Narrative	
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE		LOC.	INJ.
DRIVER ACTION 1 Phantom 2 Hit & Run 3 N/A		YEAR	MAKE	TYPE	USE	VEH. LICENSE NUMBER	STATE	VEHICLE IDENTIFICATION NUMBER	
TRAILER OR TOWED VEHICLE INFORMATION				TRAILER TYPE					
VEHICLE TRAVELING N S E W		ON	At	Est. MPH	Posted Speed	EST. VEHICLE DAMAGE 1 Disabling 2 Functional 3 No Damage		EST. TRAILER DAMAGE	
INSURANCE COMPANY (LIABILITY OR PIP)				POLICY NUMBER		VEHICLE REMOVED BY: 1 Tow Rotation List 2 Tow Owner's Request 3 Driver 4 Other			
OWNER'S FULL NAME (Check if Driver)				CURRENT ADDRESS (Number and Street)				CITY AND STATE ZIP CODE	
OWNER'S FULL NAME (Trailer or Towed Vehicle)				CURRENT ADDRESS (Number and Street)				CITY AND STATE ZIP CODE	
DRIVER (Exactly as on Driver License) / Pedestrian				CURRENT ADDRESS (Number and Street)				CITY & STATE / ZIP CODE DATE OF BIRTH	
DRIVER LICENSE NUMBER		STATE	DL TYPE	REG. END.	BAC TEST 1 Blood 2 Breath 3 Urine 4 Refused 5 None	RESULTS	AL/DRUG	PHYS. DEF.	RES
HAZARDOUS MATERIALS BEING TRANSPORTED 1 Yes 2 No		PLACARDED		1 Yes 2 No		RECOMMEND RE-EXAM	1 Yes 2 No	If YES, Explain in Narrative	
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE		LOC.	INJ.
INVESTIGATOR - RANK AND SIGNATURE		ID/BADGE NUMBER		DEPARTMENT		FHP		SO	CPD
									OTHER

# 1	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 2	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 3	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 4	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CONTRIBUTING CAUSES - DRIVER/PED.		VEHICLE DEFECT		VEHICLE MOVEMENT		VEHICLE SPECIAL FUNCTIONS	
01 No Improper Driving / Action 02 Careless Driving 03 Failed to Yield Right-of-Way 04 Improper Backing 05 Improper Lane Change 06 Improper Turn 07 Alcohol-Under Influence 08 Drugs-Under Influence 09 Alcohol & Drugs-Under Influence 10 Followed Too Closely 11 Disregarded Traffic Signal 12 Exceeded Safe Speed Limit 13 Disregarded Stop Sign 14 Failed to Maintain Equip./Vehicle 15 Improper Passing 16 Drove Left of Center 17 Exceeded Stated Speed Limit 18 Obstructing Traffic 19 Improper Load 20 Disregarded Other Traffic Control 21 Driving Wrong Side / Way 22 Fleeing Police 23 Vehicle Modified 27 All Other (Explain)		01 No Defects 02 Def. Brakes 03 Worn / Smooth Tires 04 Defective / Improper Lights 05 Puncture / Blowout 06 Steering Mech. 07 Windshield Wipers 08 Equipment / Vehicle Defect 77 All Other (Explain in Narrative)		01 Straight Ahead 02 Slowing / Stopped / Stalled 03 Making Left Turn 04 Backing 05 Making Right Turn 06 Changing Lanes 07 Entering/Leaving Parking Space 08 Properly Parked 09 Improperly Parked 10 Making U-Turn 11 Passing 12 Driverless or Runaway Veh. 77 All Other (Explain in Narrative)		1 None 2 Farm 3 Police Pursuit 4 Recreational 5 Emergency Operation 6 Construction / Maintenance 77 All Other (Explain) 88 Unknown	
LOCATION ON ROADWAY		PEDESTRIAN ACTION					
1 On Road 2 Not On Road 3 Shoulder 4 Median 5 Turn Lane / Safety Zone		01 Crossing Not at Intersection 02 Crossing at Mid-block Crosswalk 03 Crossing at Intersection 04 Walking Along Road With Traffic 05 Walking Along Road Against Traffic 06 Working on Vehicle in Road 07 Other Working in Road 08 Standing/Playing in Road 09 Standing in Pedestrian Island					

SEC. #	PASS. #	PASSENGER NAME	ADDRESS	CITY & STATE	ZIP	Age	Loc.	Inj.	Safety Equip.	Eject
		<p>Spoke to [redacted] who lives at [redacted]. She advised that she attempted to perform CPR on passenger [redacted] prior to my arrival but Driver of V¹ struck her several times and told her to get away. Driver of V² advised that he had no license and no insurance and had only recently purchased the car, there was no registration in the vehicle only a copy of the title. Driver of V² advised that he was travelling northbound on [redacted] when he observed V¹ run the stop sign at [redacted] and collide with his vehicle. Driver of V² did have a suspended license that was suspended 11 times prior. Witness [redacted] and witness [redacted] were in a white</p>								

WITNESS - NAME	ADDRESS	CITY & STATE	ZIP
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WAS INVESTIGATION MADE AT SCENE?		1 Yes 2 No - Where?		IS INVESTIGATION COMPLETE?		1 Yes 2 No - Why?		DATE OF REPORT		PHOTOS TAKEN?		1 - Yes 2 - No 3 - Investigating Agency 4 - Other	
VIOLATOR	FL STATUTE NUMBER	NAME		CHARGE		CITATION #							

FLORIDA TRAFFIC CRASH REPORT

☐ UPDATE ☒ CONTINUATION

MAIL TO: DEPT. OF HIGHWAY SAFETY & MOTOR VEHICLES

TRAFFIC CRASH RECORDS

FLORIDA

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Section

Section

COUNTY/CITY CODE		DATE OF CRASH		INVEST. AGENCY REPORT NUMBER		HSMV CRASH REPORT NUMBER	
VEH. LICENSE NUMBER		STATE		VEHICLE IDENTIFICATION NUMBER		POINT OF IMPACT CIRCLE AREA OF DAMAGE	
TRAILER OR TOWED VEHICLE INFORMATION		TRAILER TYPE					
VEHICLE TRAVELING		ON		At		EST. VEHICLE DAMAGE	
N S E W		Est. MPH		Posted Speed		EST. TRAILER DAMAGE	
INSURANCE COMPANY (LIABILITY OR PIP)		POLICY NUMBER		VEHICLE REMOVED BY:		1 Tow Rotation List 3 Driver	
OWNER'S FULL NAME (Check if Driver)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		2 Tow Owner's Request 4 Other	
OWNER'S FULL NAME (Trailer or Towed Vehicle)		CURRENT ADDRESS (Number and Street)		CITY AND STATE		ZIP CODE	
DRIVER (Exactly as on Driver License) / Pedestrian		CURRENT ADDRESS (Number and Street)		CITY & STATE / ZIP CODE		DATE OF BIRTH	
DRIVER LICENSE NUMBER		STATE		DL TYPE		REQ. END.	
BAC TEST 3 Urine 1 Blood 4 Refused 2 Breath 5 None		RESULTS		AL/DRUG		PHYS. DEF.	
HAZARDOUS MATERIALS BEING TRANSPORTED		PLACARDED		RECOMMEND RE-EXAM		1 Yes 2 No	
PASSENGER'S NAME (Additional on Continuation Page)		CURRENT ADDRESS		CITY & STATE / ZIP		AGE LOC. INJ. S. EQUIP. EJECT.	

# 1	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT \$	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 2	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT \$	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 3	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT \$	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP
# 4	PROPERTY DAMAGED - OTHER THAN VEHICLES	EST. AMOUNT \$	OWNER'S NAME	ADDRESS	CITY	STATE	ZIP

CONTRIBUTING CAUSES - DRIVER/PED.		VEHICLE DEFECT		VEHICLE MOVEMENT		VEHICLE SPECIAL FUNCTIONS	
01 No Improper Driving / Action		01 No Defects		01 Straight Ahead		1 None	
02 Careless Driving		02 Def. Brakes		02 Slowing / Stopped / Stalled		2 Farm	
03 Failed to Yield Right-of-Way		03 Worn / Smooth Tires		03 Making Left Turn		3 Police Pursuit	
04 Improper Backing		04 Defective / Improper Lights		04 Backing		4 Recreational	
05 Improper Lane Change		05 Puncture / Blowout		05 Making Right Turn	11 Passing	5 Emergency Operation	
06 Improper Turn		06 Steering Mech.		06 Changing Lanes	12 Driverless or Runaway Veh.	6 Construction / Maintenance	
07 Alcohol-Under Influence		07 Windshield Wipers	77 All Other (Explain in Narrative)	07 Entering/Leaving Parking Space	77 All Other (Explain in Narrative)		
08 Drugs-Under Influence		08 Equipment / Vehicle Defect		08 Properly Parked			
09 Alcohol & Drugs-Under Influence				09 Improperly Parked			
10 Followed Too Closely				10 Making U-Turn			
11 Disregarded Traffic Signal	19 Improper Load	LOCATION ON ROADWAY		PEDESTRIAN ACTION			
12 Exceeded Safe Speed Limit	20 Disregarded Other Traffic Control	1 On Road		01 Crossing Not at Intersection	07 Other Working in Road		
13 Disregarded Stop Sign	21 Driving Wrong Side / Way	2 Not On Road		02 Crossing at Mid-block Crosswalk	08 Standing/Playing in Road		
14 Failed to Maintain Equip. / Vehicle	22 Fleeing Police	3 Shoulder		03 Crossing at Intersection	09 Standing in Pedestrian Island	77 All Other (Explain)	
15 Improper Passing	23 Vehicle Modified	4 Median		04 Walking Along Road With Traffic		88 Unknown	
16 Drove Left of Center	77 All Other (Explain)	5 Turn Lane / Safety Zone		05 Walking Along Road Against Traffic			
17 Exceeded Stated Speed Limit				06 Working on Vehicle in Road			
18 Obstructing Traffic							

[illegible]

WITNESS - NAME	ADDRESS	CITY & STATE	ZIP

WAS INVESTIGATION MADE AT SCENE?		1 Yes <input type="checkbox"/>	2 No - Where? <input type="checkbox"/>	IS INVESTIGATION COMPLETE?	1 Yes <input type="checkbox"/>	2 No - Why? <input type="checkbox"/>	DATE OF REPORT	PHOTOS TAKEN?	1 - Yes <input type="checkbox"/>	2 - No <input type="checkbox"/>	3 - Investigating Agency <input type="checkbox"/>	4 Other <input type="checkbox"/>
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[illegible]

EXAMINER TO

P.02

EXAMINER

NAME: J. [REDACTED]
SEX: Female RACE: Black
DATE OF AUTOPSY: 08/08/97
PROSECUTOR: [REDACTED]

AUTOPSY NO.: [REDACTED]
AGE: [REDACTED]
TIME: 1: [REDACTED]

NEUROLOGIC DISORDERS:

I. BLUNT FORCE TRAUMA OF HEAD

- a. Scalp hemorrhages
- b. Fractures of skull
- c. Subdural hemorrhage
- d. Sub-arachnoid hemorrhage
- e. Contusions and lacerations of brain

OPINION:

[REDACTED] a six-week-old female infant, died as a result of blunt force injuries of the head sustained in a vehicular accident.

The manner of death is deemed to be: ACCIDENT

[REDACTED] M.D., M.L.S., M.S.
Chief Medical Examiner

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GENERAL EXAMINATION:

The body is that of a Black female infant, adequately nourished, weighing 10 pounds, measuring 21 inches and appearing to be smaller than expected according to the stated age.

The body is nude.

No jewelry, rings or watch is present.

The temperature of the body is cold to the touch. Rigor mortis is well developed and present to an equal extent in all joints. Fixed liver mortis is evident over the posterior parts of the body, except in areas exposed to pressure, where it is absent. The skin is unremarkable.

The head hair is black. Palpation of the head reveals fractures over the top of the skull. The eyes are brown with pale conjunctivae. The corneas and lenses are transparent. No petechial hemorrhages or congestion is noted in either conjunctivae. The pupils are regular, round, equal, central and measure 0.4 cm in diameter. The external ears and external auditory canals are unremarkable except for the presence of blood in the right ear. The skeleton of the nose is intact and no foreign material is present in the nostrils. No foreign material is present in the oral cavity. The gums are unremarkable and edentulous. The lips, oral mucosa and the tongue reveal no evidence of trauma.

The neck is symmetrical and unremarkable.

The shoulders are symmetrical.

The chest is symmetrical and unremarkable. The breasts are unremarkable.

The abdomen is slightly bulging and no masses can be palpated through the abdominal wall. The umbilicus is slightly bulging and herniated.

The back is symmetrical and unremarkable.

The external genitalia and the anus are unremarkable.

The extremities are symmetrical and unremarkable. The fingernails are regular, and unremarkable. The toenails are unremarkable. No edema is present in the ankles or legs.

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Passive motion of the neck, shoulders, elbows, wrists, fingers, hips, knees and ankles fails to elicit any bony crepitus or abnormal motion.

EXAMINATION OF PRESENT MEDICAL/SURGICAL TREATMENT:

- Endo-tracheal and naso-gastric tubes.
- Hospital band on left
- I.V. incision in left groin
- Intra-bony infusion needle in the right tibia

INTERNAL EXAMINATION:

The body is opened by a "Y" shaped incision. The abdominal fat pad is 0.3 cm thick at the umbilicus. The muscles of the chest and abdominal wall are normal in color and consistency. The ribs, sternum and spine exhibit no fractures. The pleural cavities are smooth and do not contain excess fluid. The peritoneal cavity is unremarkable. The liver extends 3.0 cm below the costal margins. The bladder lies below the symphysis pubis. The organs of the pleural and peritoneal cavities are in their usual positions in situ. The mesentery and omentum are unremarkable.

NECK:

The soft tissues of the neck, thyroid and cricoid cartilages, larynx, and hyoid bone show no hemorrhage or evidence of traumatic injury. The laryngeal mucosa is pale. The epiglottis and vocal cords are unremarkable.

CARDIOVASCULAR SYSTEM:

The heart weighs 25 grams. The pericardium contains 1-2 cc of serous liquid. There are no congenital abnormalities of the heart or the major blood vessels. The epicardial surface is smooth. The external configuration of the heart is unremarkable. Foramen ovale is probe patent. The right and left ventricles are unremarkable. The endocardium and valve leaflets are smooth and transparent; they exhibit no thrombi, vegetations or fibrosis. The trabeculae carneae and papillary muscles are unremarkable. The chordae tendineae are usual. The right ventricle is 0.6 cm thick and the left ventricle is 0.3 cm thick.

The coronary arteries have their usual distribution with a right predominance and are unremarkable. The coronary ostia are normal in patency. The myocardium is brown-reddish, firm and homogeneous.

The aorta unremarkable.

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The venous cava are unremarkable.

RESPIRATORY SYSTEM:

The right lung weighs 35 grams and the left lung weighs 30 grams. The tracheal mucosa is pale with a few focal sub-mucosal hemorrhages. The pleura are delicate and glistening. The lungs are slightly distended and are variegated pink to red. The lung parenchyma is of usual consistency. The lung tissue is slightly congested. No nodularity and no focal or diffuse lesions are seen.

The extra and intrapulmonary bronchi are unremarkable. The pulmonary arteries and veins exhibit no pathologic change. The hilar and mediastinal lymph nodes are unremarkable.

HEPATO-BILIARY SYSTEM:

The liver weighs 180 grams. The capsule of Glisson is transparent. The external surface is smooth, glistening and transparent. The borders are sharp. The parenchyma is of usual consistency and brown red with the usual lobular architecture and no focal or tissue lesions.

The gallbladder has delicate walls and contains a minimal amount of yellowish bile and has a smooth mucosa. No stones are present.

The intra and extrahepatic biliary ducts are patent. The hepatic and portal veins and the hepatic artery are unremarkable.

HEMO-LYMPHATIC SYSTEM:

The spleen weighs 10 grams and is unremarkable. The capsule is glistening and transparent. The internal architecture is clearly defined.

GASTROINTESTINAL SYSTEM:

The esophagus is empty and unremarkable. The stomach contains 25 grams of white cheesy curd. The remainder of the gastrointestinal system is unremarkable.

The appendix is identified.

UROGENITAL SYSTEM:

The right kidney weighs 12 grams and the left kidney weighs 14

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grams. The surfaces are smooth and show fetal lobulation. The capsules strip easily, revealing a red-brown surface. The cortico-medullary junction is well defined. The calyceal and collecting systems are not remarkable. The renal arteries and veins are unremarkable.

The ureters are not dilated or obstructed.

The bladder is empty. The bladder exhibits the usual mucosa and muscularis. The ureteral orifices are patent.

The uterus and adnexae are infantile and unremarkable.

ENDOCRINE SYSTEM:

The adrenals, thyroid, parathyroids, pancreas and pituitary are not remarkable.

MUSCULOSKELETAL SYSTEM:

There are no gross bony deformities. The muscles are well developed and of the usual color and consistency. The sternum, ribs and spine exhibit the usual bone density and marrow.

TRAUMA OF HEAD AND CENTRAL NERVOUS SYSTEM:

The scalp is reflected, revealing scalp hemorrhages, more marked posteriorly and on the top of the head. The calvarium is removed, revealing a transverse fracture, extending from side to side, parallel to and behind and close to the coronal suture. The fracture extends and branches in the right middle cranial fossa and petrous bone. There is also a branching linear fracture of the right orbital plate.

The dura mater exhibit a thin sub-dural hemorrhage over the convexity of the brain, and sub-dural hemorrhages are seen in the middle cranial fossae more on the right. Focal sub-arachnoid hemorrhages are also focally seen. The right orbital and inferior temporal lobes show small lacerations. The brain weighs 510 grams. The trauma has been described above. The sulci and gyri occupy their usual position. The blood vessels at the base do not reveal any aneurysms or other abnormalities. The cerebral and cerebellar hemispheres are symmetrical and the surface does not display any scar tissue. The ventricles contain the usual amount of colorless fluid. The cerebellar tonsils are not herniated. Multiple sections through the cerebrum, cerebellum, pons, midbrain and medulla exhibit the usual internal pattern with no focal or diffuse lesions, except for trauma.

[REDACTED] 1997 14:27 FROM [REDACTED] TO [REDACTED] P.07

[REDACTED] 13:47 FROM [REDACTED] TO [REDACTED] P.07

[REDACTED] 1996 10:00 A.M. [REDACTED]

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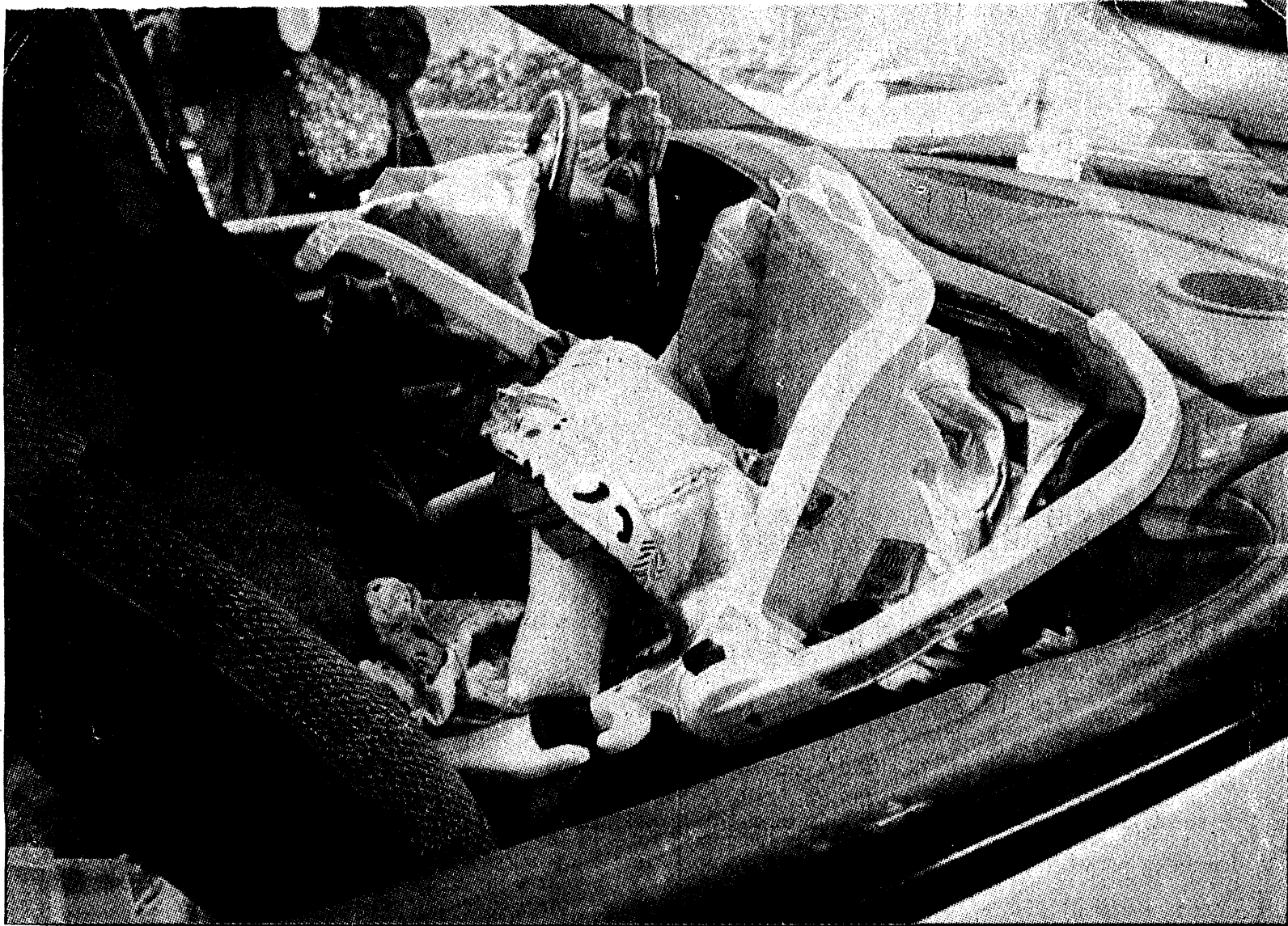
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VIN: [REDACTED]

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DEADLY DECISION: Baby [redacted] died [redacted] when a collision that caused minor damage to the vehicles deployed the air bag in front of her infant seat. The visor of the van she was in warns against placing child seats in the front seat.

Van's air bag crushed baby's head

[redacted] determined Thursday that a 7-week-old infant killed in a car crash died when an air bag hit her infant seat.

"At the time of impact, the air bag inflated as it was supposed to. It hit the back of the infant seat," [redacted] said.

[redacted] suffered a "compression fracture because of this dramatic impact, causing almost instantaneous death," he said.

The accident happened about 10:50 p.m. [redacted] when [redacted] the baby's mother, ran a stop sign in [redacted] and slammed into a pass-

When the air bag inflated, it hit the back of the baby seat, 'causing almost instantaneous death,' the medical examiner said.

ing Chevrolet, police spokeswoman [redacted] said.

Police think [redacted] was going about 25 miles per hour when her new Dodge van hit a 1966 Chevrolet driven by [redacted]

Police say [redacted] was westbound on [redacted] when she ran the stop sign and crashed into [redacted] car, which was headed north on [redacted]

[redacted] Witnesses told police it appeared that [redacted] [redacted] never hit the brakes.

The collision caused only relatively minor damage to the vehicles.

But it was enough to cause the van's air bags to deploy. [redacted] was facing backward in an infant seat that was secured to the front seat of the van. The air bag struck with such force that

it broke the infant seat and crushed the baby's head.

The van's visor carries a warning against placing a child seat in the front.

"It was a survivable accident if the child seat had been in the back seat," [redacted] said.

Police have not filed charges against [redacted]

"They're waiting for the completion of the investigation before filing any charges," [redacted] said.

Investigators are waiting for results of a blood-alcohol test taken the night of the accident. The test was ordered because there were indications that [redacted] might have been drinking, police said.